

INTEGRATED PROVIDER NETWORK SERVICE DESCRIPTION LIST

| Service Name / II | D | | Set IPN Rate | Avg IPN Rate | Billing Unit |
|----------------------|--|--|--|-------------------------|--------------|
| 5202 H2021 | After School Programs Community-based wrap services, per 15 min | These are before or after school programs that offer supervision and structure for youth. Programs must include social, recreational and educational activities. This service can only be provided for up to four hours per day, and can only be provided when school or summer school is in session. Services are to be provided in an agency setting. | 12.00 | | Hour |
| | Community-based wraparound services | | | | |
| Credenti | ials: A Day Care Certification of | r Day Care License is required if serving four to eight children under the age of seven or eight or i | more children to age | 12. | |
| | hours of training. Training training in cardiopulmonary Training may be documented of the above areas is accept Provider Agency employee year of driving experience, any of the above areas is accept any of the above areas is accept the second secon | ast be at least 21 years of age and have at least 1 year of experience working with children and have may include: early childhood training, child/human growth and development, early childhood educy resuscitation, recognition of and reporting of childhood abuse and neglect, orientation to agency ed via: attendance sheets, certificates of attendance or diplomas and is to be keep on file by the age able with the appropriate supporting documentation. It is providing after school programming must be: at least 18 years of age, have a valid driver's licentagency employees must complete 24 hours of training as described above within 6 months of enceptable with the appropriate supporting documentation. | cation, first aid train policies and procedulency. Prior training see and have at least of | ing, ires. in any | |
| 5565B T2019 | A program description is to Anger Management Group Therapeutic behavioral services | Anger Management Groups must follow a time-limited Wraparound / Children's Court Services approved curriculum. The agency's Anger Management curriculum is offered in a standardized session (60 to 90 minutes long) with of the training program typically ranging from six to twelve weeks. Per session length and program duration in number of sessions and session per week should be identified in the curriculum | 7.50 | | Quarter Hour |

The Anger Management curriculum should be designed to teach youth strategies (e.g., problem-solving skills) that enable them to control their anger in the face of conflict. Although specific elements used in Anger Management training vary, most programs use a combination of techniques. Group rules need to incorporated into the program and should be identified for participants during the first session. Curriculum activities may include: lectures, group discussions, role-playing, modeling of appropriate behaviors, simulation games, examples on videotape, pre and post tests.

The Anger Management curriculum must include components that are designed to address the following elements:

1) awareness of one's own emotional and physical states when they are angry

2)the ability to understand the perspective of others

3)recognizing and using appropriate verbal and non-verbal communication skills

4)use of specific strategies that help the youth to moderate their responses to potential conflicts (e.g., .Stop! Think! What should I do?, etc.)

5)understanding choices and consequences

6)training in problem-solving skills and coping strategies including:

- · identifying the problem
- · generating alternative solutions
- · considering the consequences of each solution
- · selecting an effective response to the situation
- · evaluating outcomes of that response
- · identifying socially acceptable ways to release and manage aggression

7)basic relaxation techniques.

8)effects of alcohol and other drugs have on behavior/anger management

Agencies must review and update their curriculum annually and maintain records of the annual curriculum review(s) (review records to be made available upon request).

H0004 Behavioral health counseling &

therapy, per 15 min

Credentials: **Credentialing Requirements**

> Anger Management providers must have a BA/BS degree in Social Work, Psychology, Sociology, Criminal Justice or other approved Human Services degree, plus 2 years post-degree experience in counseling youth or working in a program whose primary clientele are youth with serious emotional or

behavioral health needs. A Master's degree in the stated programs may substitute for the 2 years experience.

5001 AODA Assessment H0001

Alcohol and/or drug assessment Initial assessment to evaluate the need for AODA treatment services. 25.00

Quarter Hour

Credentials: AODA outpatient clinic license and:

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| -Clinical Substance Abuse Counselor Certification or above OR -MS Degree with documented 3,000+ hours of work experience preferably in a setting dealing with AODA issues OR -Ph.D., utilizing recognized AODA assessment tools. | | | |
| All providers of service must have a National Provider Identifier (NPI). | | | |
| 5173 AODA Day Services H2020 Therapeutic behavioral services Day services for an adult/family caregiver focusing on AODA issues and treatment. | | 60.00 | Daily |
| Credentials: A DHFS-CSAS (Community Substance Abuse Services) Day Treatment Certificate must be submitted in the provider approximately a provider approximately and the community Substance Abuse Services. | plication process. | | |
| AODA Detoxification H0009 Alcohol and/or drug services, acute detox Short-term (maximum 3-5 days) treatment for an adult parent/caregiver for acute alcohol or drug intoxification or withdrawal. Clients are monitored on a 24-hour basis by licensed physicians, nurses and certified AODA staff. Credentials: AODA Detox Certificate (DHFS Certificate-HFS 61.56) | | 240.00 | Daily |
| AODA Group Counseling Alcohol and/or Drug Svcs; grp couns. NOTE: APPLICATIONS ACCEPTED FOR ACTIVE-ONGOING GROUPS ONLY. AODA Group counseling provided in a Community Substance Abuse Services Clinic (CSAS) or a certified Outpatient Mental Health Clinic under DHS 75 guidelines. A description of the group identifying the target population, objective of the group, and days/times the group meets must be included in the application to provide this service. | 8.00 | | Quarter Hour |
| Credentials: AODA outpatient clinic license and: -Substance Abuse Counselor Certification or above -Substance Abuse Counselor-In-Training certification with clinical supervisor authorization to provide counseling after or requirements has been met: -The substance abuse counselor-in-training has completed 1000 hours of supervised training or supervised work experie verified by the agency Clinical Supervisor -If an RADC I (credentialed by the WCB) converted to the substance abuse counselor-in-training, the credential holder in disorder counseling after providing proof to their clinical supervisor that within the previous 5 years they have completed education by March 1, 2007 in any combination of the performance domains listed in s. RL 166.03. All providers of service must have a National Provider Identifier (NPI). | nce in the core function | use | |
| 5101 AODA Individual/Family Counseling H0022 Alcohol and/or Drug Intervention Svc Individual/family counseling related to AODA issues provided in a licensed Community Substance Abuse Services Clinic (CSAS) or Outpatient Mental Health | 16.00 | | Quarter Hour |

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| Clinic under DHS 75 guidelines. | | | |
| AODA outpatient clinic license and: -Substance Abuse Counselor Certification or above -Substance Abuse Counselor-In-Training certification with clinical supervisor authorization to provide counseling after one of the requirements has been met: -The substance abuse counselor-in-training has completed 1000 hours of supervised training or supervised work experience in the verified by the agency Clinical Supervisor -If an RADC I (credentialed by the WCB) converted to the substance abuse counselor-in-training, the credential holder may predisorder counseling after providing proof to their clinical supervisor that within the previous 5 years they have completed 100 hours of supervisor that within the previous 5 years they have completed 100 hours of supervisor that within the previous 5 years they have completed 100 hours of supervisor that within the previous 5 years they have completed 100 hours of supervisor that within the previous 5 years they have completed 100 hours of supervisor that within the previous 5 years they have completed 100 hours of supervisor that within the previous 5 years they have completed 100 hours of supervisor that within the previous 5 years they have completed 100 hours of supervisor that within the previous 5 years they have completed 100 hours of supervisor that within the previous 5 years they have completed 100 hours of supervisor that within the previous 5 years they have completed 100 hours of supervisor that within the previous 5 years they have completed 100 hours of supervisor that within the previous 5 years they have completed 100 hours of supervisor that within the previous 5 years they have completed 100 hours of supervisor that within the previous 5 years they have completed 100 hours of supervisor that within the previous 5 years they have completed 100 hours of supervisor that within the previous 5 years they have completed 100 hours of supervisor that within the previous 5 years they have completed 100 hours of supervisor that within the previous 5 years they have comple | the core functions | ise | |
| All providers of service must have a National Provider Identifier (NPI). 5103 H0003 AODA Lab and Medical Services AODA, Lab Analysis Random urine surveillance and other substance abuse screening and monitoring by an approved lab. | 1.00 | | Dollar |
| Alcohol and/or drug screening, lab analysis Credentials: Laboratory certification and per unit rate. | | | |
| 5348 H0018 AODA Resid. Treat-With Child Behavioral health, short-term residential Same as AODA Residential Treatment (Service Code 5347), except with up to four children under age of 10. | | 140.00 | Daily |
| Credentials: Community Based Residential Facility License | | | |
| AODA Residential Behavioral health, short-term residential A short-term (up to 30 days) residential program for an adult caregiver to provide treatment and support for substance abuse in order to maintain their parenting role. (This service needs to be prior authorized by Provider Network Director for Wraparound or the Director of SafeNow for Safety Services.) | | 85.00 | Daily |
| Credentials: Community Based Residential Facility License | | | |
| Assessment Svcs-Nursing Nursing assessment/eval In-home assessment of physical health needs of a child performed by a RN. (A Healthcheck Screening would fall under this category.) Assessment and monitoring | 64.00 | | Session |

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| | | of the effects of medication prescribed by a M.D. would also be within this area. Includes In-Home Health Care.) | | | |
| Credentials: | R.N. License.All providers | of this service must have a National Provider Identifier (NPI). | | | |
| 5000A Asses 90801 Psych exam | sments-M.D. iatric diagnostic interview, | Psychiatric and/or Medical assessment of a child or adolescent and their family performed by a licensed Psychiatrist (M.D.) and/or other Medical Physician (M.D.) with recommendations for treatment. A psychiatric report of specific findings (with five axis diagnoses)must be submitted to the Care Coordinator within 30 days of the appointment. | 200.00 | | Session |
| Credentials: | M.D. License. | | | | |
| | Effective 1/1/2007, provide | rs of this services must have a National Provider Identifier (NPI). | | | |
| 5551 BRIC T2003 Non 6 | K Program emerg transport-per trip | Wisconsin Green Bay Correctional facility "BRICK: Program. The letters in BRICK stand for Breaking down the walls to Reality through Intervention and Counseling for Kids. Integrity Family Services, LLC coordinates Wraparound Milwaukee and SafeNow enrolled youth participation in the BRICK program which includes transporting the youth to and from the Green Bay Coorectional Institution, supervision of youth participating in the half day BRICK Program, lunch, youth discussion regarding their response to the program and completion of a "client satisfaction survey". Green Bay Correctional Facilty inmates who are concerned about the direction taken by many innercity youth meet with youth that attend the program to explain the reality of prison life. Inmate participants come from all cultures, various backgrounds, varying levels of education, lifestyles, and environments. BRICK Program sessions are conducted for youth identified by community agencies or the courts as being "at risk" to commit crimes. | 55.00 | | Session |
| Credentials: | | tegrity Family Services, LLC. Integrity staff with prior experience as a Crisis Stabilization provide aining provide escort and supervision for Wraparound Milwaukee youth that participate in the BRIG | _ | | |
| | Valid Wisconsin Drivers Li | cense (Drivers Abstract on file with agency) | | | |
| | Integrity Family Service, Ll the employees file at the ag | LC must obtain 2 letters of reference regarding the provider's professional abilities. Reference letterency. | ers are to be mainta | ined in | |
| | _ | For staff with no prior crisis stabilization related experience or 20 hours for staff with 6 months of provision of this service. | rior experience. Tr | aining | |
| | ·Training can include Crisis | Prevention Intervention (CPI), Managing Aggressive Behavior (MAB) or a similar program along | with other related | | |

| Service Name / ID |) | | Set IPN Rate | Avg IPN Rate | Billing Unit |
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| | ·Crisis regulations. ·Wraparound crisis interven ·Specific requirements assoc ·Wisconsin state statues and ·Basic mental health interve | tervention and de-escalation training in the following areas: tion policies and procedures and ciated with this service. administrative rules related to patient rights and confidentiality of youth records. ntion techniques applicable to crisis situations. nd responding to persons with emergency mental health needs who are experience a crisis or AODA | related problems | | |
| 5201 T2037 | Camp Therapeutic camping, day, waiver | Camp is a specialized program for children with emotional, and behavioral challenges that is generally offered during non-school time and has a specific beginning and end date for each camp session (usually ranging from 1 day to 2 weeks in duration). Camp may be full day or partial day. Camp offers goal directed activities for youth that will lead to specific skill development, which is clearly identified in the agency description (example: leadership camp). Agencies providing camp shall provide a description for the specific camp/s offered by the agency to include: 1. Title or name of the "Camp" (here after referred to as "camp" or "program"). 2. Proposed daily rate for the program. 3. Location(s) where the camp/program will take place. 4. Dates and time of day the camp will be conducted. 5. Overview of the client related program objectives and goals (skills or abilities the youth will achieve as a result of participation in the program). 6. Minimum client to staff ratio. 7. Description of appropriate participants including: age, gender, challenges enrolled youth might be experiencing (ie: lack self confidence; excessively shy, etc.). 8. Skills / abilities the youth will acquire as a result of participation in the specific camp/program. 9. Minimum requirements for youth participation in the program. 10. Calendar of events including schedule of all events (by day and section of the day) to be provided throughout the course of the program. 11. Identification of equipment and supplies that will be used by participants and a list of alternate or substitute activities to be conducted in the event the scheduled activity cannot be held. 12. Meals and snacks to be provided (time for participants meals must be include in program schedule if the program is offered during a normal meal time; cost of agency provided meals to be included in daily rate). 13. Participant conduct that could result in participant expulsion from the program. | 1.00 | | Total |
| | | 16. Agency contact information during the program implementation (including: how | | | |

families may contact participants in the event of an emergency).

Rates should be all inclusive. Any additional cost(s) to the participant (such as spending money for outings) must be identified at the time the program description is presented to Wraparound Milwaukee for approval.

If the agency program involves client transportation to another location, the agency must meet all the Wraparound Milwaukee requirements associated with client transport including: obtaining a parent or guardian authorization to transport the client (consent form to be signed and dated prior to program participation). The driver must be at least 18 years of age and have a valid/current driver's license with minimum one year driving experience; driver's abstract and adequate insurance coverage on file with the provider agency.

Overnight stays not allowed. Out-of-county travel requires Wraparound Administration approval IN ADVANCE.

Program summary and rate to be submitted to Wraparound Milwaukee for approval at least 60 days prior to the start date of the proposed program. Repeat programs to be reviewed annually.

Credentials:

A Day Care Certification or Day Care License is required if serving four to eight children under the age of seven or eight or more children to age 12.

The program supervisor must be at least 21 years of age have a minimum of a High School diploma or equivalent and have at least 1 year of experience working with children and have completed at least 24 hours of training. Training may include: early childhood training, child/human growth and development, early childhood education, first aid training, training in cardiopulmonary resuscitation, recognition of and reporting of childhood abuse and neglect, orientation to agency policies and procedures. Training may be documented via: attendance sheets, certificates of attendance or diplomas and is to be keep on file by the agency. Prior training in any of the above areas is acceptable with the appropriate supporting documentation.

Programs providing services to youth diagnosed with developmental disorders and pervasive developmental disorders must be supervised by an individual with a bachelor's degree (or above) in human services or education with at least 2 years experience working with youth with this type of disorder.

Additional agency employees providing client supervision during the program must

UNTIL FURTHER NOTICE, WRAPAROUND MILWAUKEE IS NOT UTILIZING ANY ADDITIONAL CARE COORDINATION AGENCIES.

case-by-case basis from agencies in the Provider Network requesting and being

Credentials:

Care Coordinators must possess a BA/BS degree in Social Work, Psychology, Nursing, Occupational Therapy, or a related field with experience in Human Services work, preferably case management.

TO BE SUBMITTED TO WRAPAROUND:

approved as care coordination

providers.

| Service Name / ID | | Set IPN Rate | Avg IPN Rate | Billing Un |
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| Copy of Care Coordinators re | sume, driver's abstract, and background check (all 3 parts). | | | |
| 5502B Case Mgmt-Waiver Program T2022 Case management | Same as 5502A-but for waiver program slots | 2.82 | 2.82 | Daily |
| Credentials: Same as 5502A-but for waive | r program slots | | | |
| 5441 Child Care (Hourly) S2027 Specialized child care | Supervision of a child for up to 4 hours in a licensed Day Care facility (if serving more than three children at one time). The purpose is to facilitate the attendance by parent/legal guardian or caretaker at Child/Family Team meetings, therapy sessions, but not for the purpose of providing child care during working hours for a parent(s)/caregiver. | | 6.00 | Hour |
| T1005 Respite care svcs, up to 15 min | | | | |
| Credentials: Day Care License | | | | |
| Credentials: Limited to SHARE Wisconsin | This service allows the enrolled youth's family to purchase food items at SHARE Mobile Market Food Sales. The Care Coordinator may authorize an emergency food purchase where the family is in need of food and the Care Coordinator might otherwise use discretionary funds to purchase essential food items. This service should not to be used for families that have the financial means to purchase their own food. The Care Coordinator must enter a service authorization request (SAR) in Synthesis and provide the family with an oroginal copy of the "SHARE Authorization" which has been dated and signed by the care coordinator. The SHARE Authorization will identify the client name and maximum purchase amount for the identified month. The family must present the original copy of the Wraparound Milwaukee "SHARE Authorization" at the SHARE Express sale in order to receive services. SHARE Wisconsin will keep the original copy of the "SHARE Authorization" which is then used by SHARE Wisconsin to bill Wraparound Milwaukee for the exact amount of the grocery purchase up to the total dollar amount authorized by the Care Coordinator. Each authorization is good for one day only during the authorized month. Authorizations that have been modified or tampered with will not be accepted. | | | Dollar |
| 5588 Commodity-Food (with perishables) S5199 Personal Care Items, NOS | Perishable and non-perishable and nutritionally balanced Family Pack containing various items of food. | \$25.00 | | Each |
| Credentials: | | | | |

| Foster Home License Foster Home License Sis Bed-Group Home Sis Intervention MH services, diem Group Home License Sis Respite and Nursery Sis intervention mental health Sis Intervention MH services, diem | A licensed foster home that accepts children on an emergency basis. Youth must be at high risk of hospitalization or other out-of-home placement for a crisis bed to be needed. Staff/foster parents have been trained in working with children with emotional, behavioral or mental health needs. Placements in a foster home should usually be made for periods of a few days, but should not exceed 30 days. Licensed Group Home setting with staff who have been trained in working with children with emotional, behavioral, or mental health needs. Placement in a group home cannot exceed 14 days. Licensed shelter placement for children 12 and under who need immediate placement due to a crisis within the family. This is a short-term (up to 3 days) placement. | | 90.00 | Daily Daily |
|---|--|--|---|---|
| sis Bed-Group Home sis Intervention MH services, diem Group Home License sis Respite and Nursery sis intervention mental health sis Intervention MH services, | children with emotional, behavioral, or mental health needs. Placement in a group home cannot exceed 14 days. Licensed shelter placement for children 12 and under who need immediate placement | | | - |
| Group Home License sis Respite and Nursery sis intervention mental health sis Intervention MH services, | children with emotional, behavioral, or mental health needs. Placement in a group home cannot exceed 14 days. Licensed shelter placement for children 12 and under who need immediate placement | | | - |
| sis Respite and Nursery sis intervention mental health sis Intervention MH services, | <u>.</u> | | 100.00 | Daily |
| sis Intervention MH services, | <u>.</u> | | 100.00 | Daily |
| | | | | |
| | | | | |
| Shelter License | | | | |
| sis Runaway Shelter sis Intervention MH services, diem | A home licensed under s. 48.48 or 48.75 providing housing and services to a runaway child for up to 15 days plus a 15-day extension with consent of the child and the consent of the child's parent, guardian or legal custodian. Such a shelter may only hold a child without the consent of the legally responsible party with proper notification to the court and required hearing as prescribed for runaway homes in s48.227. Note: For youth under the jurisdiction of the Bureau of Milwaukee Child Welfare, runaway shelters are only used when all other shelters and group homes are filled or no other resource will accept the child. The service is currently limited to one agency in the Network. | | 105.00 | Daily |
| Agencies providing crisis ru | unaway shelter must be licensed under the State of Wisconsin as a Child Placing Agency and Grou | p Home. | | |
| sis Stabilization/Supervision sis intervention, mental health | Crisis Stabilization and Supervision are 1:1 services provided to Wraparound enrolled youth who due to their emotional and/or mental health needs are at risk of imminent placement in a psychiatric hospital, residential treatment center or other institutional | 27.50 | | Hour |
| sis | s Stabilization/Supervision | filled or no other resource will accept the child. The service is currently limited to one agency in the Network. Agencies providing crisis runaway shelter must be licensed under the State of Wisconsin as a Child Placing Agency and Grouss Stabilization/Supervision s intervention, mental health Crisis Stabilization and Supervision are 1:1 services provided to Wraparound enrolled youth who due to their emotional and/or mental health needs are at risk of imminent | filled or no other resource will accept the child. The service is currently limited to one agency in the Network. Agencies providing crisis runaway shelter must be licensed under the State of Wisconsin as a Child Placing Agency and Group Home. S Stabilization/Supervision s intervention, mental health Crisis Stabilization and Supervision are 1:1 services provided to Wraparound enrolled youth who due to their emotional and/or mental health needs are at risk of imminent placement in a psychiatric hospital, residential treatment center or other institutional | filled or no other resource will accept the child. The service is currently limited to one agency in the Network. Agencies providing crisis runaway shelter must be licensed under the State of Wisconsin as a Child Placing Agency and Group Home. S Stabilization/Supervision s intervention, mental health Crisis Stabilization and Supervision are 1:1 services provided to Wraparound enrolled youth who due to their emotional and/or mental health needs are at risk of imminent placement in a psychiatric hospital, residential treatment center or other institutional |

in or outside the youth's home, designed to evaluate, manage, monitor, stabilize and support the youth's well-being and appropriate behavior consistent with the youth's individual crisis/safety plan. The crisis stabilizer helps insure adherence of the youth and caregiver to the crisis/safety plan including helping the family recognize high risk behaviors, modeling and teaching effective interventions to deescalate the crisis, identifying and assisting the youth with accessing community resources that will aide in the crisis intervention and/or stabilization.

Appropriate Crisis 1:1 interventions may include:

- ·Providing 1:1 counseling and support.
- ·Providing crisis related transportation as needed.
- ·Implementing strategies identified in the crisis plan.
- Removing the youth from stressful situations ie: take child to an activity to reduce stress.
- ·Providing information and feedback to the Mobile Crisis Team and Child and Family Team.
- ·Documenting and writing reports.
- ·Attending Plan of Care, Child and Family Team and other team meetings.

Supervision is generally a short-term mental health intervention 30 to 90-days in duration that may require seven day per week/daily youth contact (face-to-face or by phone) associated with a specific circumstance or situation as identified in the youth's crisis and/or safety plan. Supervision services are designed to aid in sustaining the youth safely in the community. Supervision assists youth who are unable to manage routine daily responsibilities by providing observation, monitoring, direction, and support services for the identified youth in areas such as: attending school, management of curfews, compliance with safety plan requirements identified in the youth's plan of care, attendance at support or therapy sessions, taking prescribed medications or other tasks or events as specified in the individual youth's crisis/safety plan.

A detailed description of the specific services to be provided must be documented in the individual youth's crisis/safety plan.

S9484 Crisis Intervention MH services, per hour

Credentials:

1.Crisis Stabilization/Supervision providers must be affiliated with an agency certified by Wraparound Milwaukee to provide crisis stabilization work with children with acute and/or intense needs.

2.Crisis Stabilization/Supervision providers must possess a High School Diploma or G.E.D. A Bachelor's Degree in a Human Services field is

desirable.

- 3. Agencies must obtain 2 letters of reference regarding the provider's professional abilities. Reference letters are to be maintained in the employees file at the agency.
- 4.Agencies providing Crisis Stabilization/Supervision must provide training and orientation for all staff in crisis intervention and de-escalation techniques. Training shall be designed to ensure that staff have knowledge and understanding of:
- ·Crisis regulations.
- ·Wraparound crisis intervention policies and procedures and
- ·Provider job responsibilities.
- ·Relevant state statues and administrative rules including patient rights and confidentiality of youth records.
- Basic mental health and psychopharmacology concepts applicable to crisis situations.
- ·Techniques for assessing and responding to persons with emergency mental health needs who are suicidal and/or are experiencing AODA related problems.

Training can include Crisis Prevention Intervention (CPI), Managing Aggressive Behavior (MAB) or a similar program along with other related in-service training. The Director of the Mobile Urgent Treatment Team must approve new staff training curriculums. Initial training requirements are: 40 hours for staff with no prior related experience or 20 hours for staff with 6 months of experience. Training must be completed with first 3 months of employment and documented in the employee's file at the agency.

- 5.Providers are required to attend at least 8 hours per year of ongoing in-service training on emergency mental health services, rules and procedures relevant to providing crisis services, compliance with state and federal regulations, cultural competency in mental health services and current issues in youth's rights and services. Ongoing training records and certificates of that training must be documented and keep in the employee's file at the agency.
- 6.Ongoing agency supervision must be provided weekly for Crisis Stabilization/Supervision providers by a Masters-level clinician with 3000 hours of supervised clinical experience or above. One hour of supervision must be provided for every 30 hours of documented client contact.
- 7. Crisis Stabilization/Supervision providers must be accessible with 24-hour coverage, e.g. rotating on-call coverage.
- 8.Agency must respond to a referral by telephone within one day (24 hours) with face-to-face contact within three days. (Refer to HFS 34 for further details.)
- 9. Crisis Stabilization/Supervision provider notes need to reflect the nature of and youth response to the intervention provided.

(Refer to DFS 34 and applicable Wraparound Milwaukee policies for further details.)

placement in a psychiatric hospital, residential treatment center or other institutional placement.

Crisis 1:1 stabilization is a short-term or ongoing mental health intervention provided in or outside the youth's home, designed to evaluate, manage, monitor, stabilize and support the youth's well-being and appropriate behavior consistent with the youth's individual crisis/safety plan. The crisis stabilizer helps insure adherence of the youth and caregiver to the crisis/safety plan including helping the family recognize high risk behaviors, modeling and teaching effective interventions to deescalate the crisis, identifying and assisting the youth with accessing community resources that will aide in the crisis intervention and/or stabilization.

Appropriate Crisis 1:1 interventions may include:

- Providing 1:1 counseling and support.
- Providing crisis related transportation as needed.
- Implementing strategies identified in the crisis plan.
- Removing the youth from stressful situations i.e., take child to an activity to reduce stress.
- Providing information and feedback to the Mobile Crisis Team and Child and Family Team.
- Documenting and writing reports.
- Attending Plan of Care, Child and Family Team and other team meetings.

Supervision is generally a short-term mental health intervention 30 to 90-days in duration that may require seven day per week/daily youth contact (face-to-face or by phone) associated with a specific circumstance or situation as identified in the youth's crisis and/or safety plan. Supervision services are designed to aid in sustaining the youth safely in the community. Supervision assists youth who are unable to manage routine daily responsibilities by providing observation, monitoring, direction, and support services for the identified youth in areas such as: attending school, management of curfews, compliance with safety plan requirements identified in the youth's plan of care, attendance at support or therapy sessions, taking prescribed medications or other tasks or events as specified in the individual youth's crisis/safety plan.

A detailed description of the specific services to be provided must be documented in the individual youth's crisis/safety plan.

Credentials: 1. Crisis Stabilization/Supervision providers must be affiliated with an agency certified by Wraparound Milwaukee to provide crisis stabilization work

with children with acute and/or intense needs.

- 2. Crisis Stabilization/Supervision providers under this service area must possess a Master's Degree or Bachelor's Degree in a Human Services field.
- 3. Crisis Stabilization/Supervision providers under this service area must have one year of full-time, post degree experience in a human service area providing direct services to children or adolescents with serious emotional, behavioral or mental health conditions. Wraparound Milwaukee and Mobile Urgent Treatment Team (M.U.T.T.) will have final approval whether providers meet the qualifying experience requirement.
- 4. Agencies must obtain 2 letters of reference regarding the provider's professional abilities. Reference letters are to be maintained in the employees file at the agency.
- 5. Agencies providing Crisis Stabilization/Supervision must provide training and orientation for all staff in crisis intervention and de-escalation techniques. Training shall be designed to ensure that staff have knowledge and understanding of:
- a) Crisis regulations.
- b) Wraparound crisis intervention policies and procedures and
- c) Provider job responsibilities.
- d) Relevant state statues and administrative rules including patient rights and confidentiality of youth records.
- e) Basic mental health and psychopharmacology concepts applicable to crisis situations.
- f) Techniques for assessing and responding to persons with emergency mental health needs who are suicidal and/or are experiencing AODA related problems.

Training can include Crisis Prevention Intervention (CPI), Managing Aggressive Behavior (MAB) or a similar program along with other related in-service training. The Director of the Mobile Urgent Treatment Team must approve new staff training curriculums. Initial training requirements are: 40 hours for staff with no prior related experience or 20 hours for staff with 6 months of experience. Training must be completed with first 3 months of employment and documented in the employee's file at the agency.

- 6. Providers are required to attend at least 8 hours per year of ongoing in-service training on emergency mental health services, rules and procedures relevant to providing crisis services, compliance with state and federal regulations, cultural competency in mental health services and current issues in youth's rights and services. Ongoing training records and certificates of that training must be documented and keep in the employee's file at the agency.
- 7. Ongoing agency supervision must be provided weekly for Crisis Stabilization/Supervision providers by a Masters-level licensed clinician with 3000 hours of supervised clinical experience or above. One hour of supervision must be provided for every 30 hours of documented client contact.
- 8. Crisis Stabilization/Supervision providers must be accessible with 24-hour coverage, e.g. rotating on-call coverage.
- 9. Agency must respond to a referral by telephone within one day (24 hours) with face-to-face contact within three days. (Refer to HFS 34 for further details.)
- 10. Crisis Stabilization/Supervision provider notes need to reflect the nature of and youth response to the intervention provided.
- 11. The BA/BS or MS level of certification is the preferred level of provider for high-risk youth.
- 12. The maximum amount of allowable Crisis 1:1 Stabilization/Supervision time for this higher level of performing provider including documentation times should not exceed 35 hours per week.

5562 Daily Living Skills-Group H2014 Skills training & development

Daily Living Skills Group provides support, training and skill development in a group setting of up to 6 clients ages 14 to 18 in the Daily Living Skills areas identified below.

Agencies are to establish an initial baseline regarding the client's skill and knowledge base related to Daily Living Skills. This may be accomplished through the use of a 16.00

Hour

| Service Name / ID | | | Set IPN Rate | Avg IPN Rate | Billing Unit |
|----------------------|--|---|----------------------|-----------------|--------------|
| | | standardized assessment and client observation and is to be documented in the client record. | | | |
| | | Training should be provided in modules by topic including, but not limited to the following areas. | | | |
| | | Basic self-care, grooming and hygiene Appropriate medication management and storage. Use of a telephone and basic communication skills including accessing emergency | | | |
| | | police, fire and medical assistance 4. Nutrition, meal planning and preparation. Including general cooking skills and use of conventional stove/oven and microwave oven. 5. Purchase and proper/safe storage of food, household supplies and chemicals. 6. Household maintenance ie: making a bed; laundry skills; vacuuming and dusting; proper cleaning for kitchen and bathroom facilities; trash removal and recycling. | | | |
| | | 7. Laundry and basic mending skills for clothing/bedding. Training can be provided at the client's residence or at a provider agency facility. | | | |
| | | Only field trips to grocery/retail stores, laundromats or food pantries are reimbursable. Transportation time associated with field trips is reimbursable only if the client is being transported by agency staff. | | | |
| | | This service requires a core curriculum outlining the specific course of study, which is filed with and pre-approved by the Wraparound Milwaukee Provider Network. | 15.00 | | |
| | Skills training & development, per 15 min | | 15.00 | | |
| Credentia | | School diploma or equivalent and a minimum of 2 years (full-time) experience working with emoridual with a minimum of a bachelor's degree in a human services field or education. | tionally/behaviorall | y | |
| 5561 H2014 | Daily Living Skills-Individual Skills training & development, per 15 min | Daily Living Skills Individual provides support, training and skill development on an individual (1:1) basis for clients ages 14 to 18 in the Daily Living Skills areas identified below. | 30.00 | | Hour |
| | | Agencies are to establish an initial baseline regarding the client's skill and knowledge base related to Daily Living Skills. This may be accomplished through the use of a standardized assessment and client observation and is to be documented in the client record. | | | |
| | | Training should be provided in modules by topic including, but not limited to the following areas. | | | |
| | | Page 15 of 75 | | | |

| Service Name / ID | | | Set IPN Rate | Avg IPN Rate | Billing Unit |
|-----------------------|---|--|----------------------|-----------------|--------------|
| | | Basic self-care, grooming and hygiene Appropriate medication management and storage. Use of a telephone and basic communication skills including accessing emergency police, fire and medical assistance Nutrition, meal planning and preparation. Including general cooking skills and use of conventional stove/oven and microwave oven. Purchase and proper/safe storage of food, household supplies and chemicals. Household maintenance ie: making a bed; laundry skills; vacuuming and dusting; proper cleaning for kitchen and bathroom facilities; trash removal and recycling. Laundry and basic mending skills for clothing/bedding. | | | |
| | | Training can be provided at the client's residence or at a provider agency facility. Only field trips to grocery/retail stores, laundromats or food pantries are reimbursable. Transportation time associated with field trips is reimbursable only if the client is being transported by agency staff. | | | |
| | | This service requires a core curriculum outlining the specific course of study, which is filed with and pre-approved by the Wraparound Milwaukee Provider Network. | 32.00 | | |
| Skil Credentials: | | School diploma or equivalent and a minimum of 2 years (full-time) experience working with emovidual with a minimum of a bachelor's degree in a human services field or education. | otionally/behavioral | ly | |
| 5170 Day H2012 Beh | Treatment avioral health day tx, per hour | Non-Medicaid Day Treatment for individual or group activities and treatment provided in a setting that also provides education. Day Treatment programs provide structure, therapy and comprehensive support services, i.e. meals, transportation to and from the site, recreation, etc. These services are goal-oriented and time limited to facilitate the child's return to his/her home school or other public school program. This service must be prior authorized as of 9/1/03. | 72.00 | | Daily |
| Credentials: | An Outpatient Mental Healt process. | h License, Department of Public Instruction License, or Child Care Institution License must be su | bmitted in the appli | ication | |
| 5172 Day H2012 Beh | Treatment (Medicaid-day) avioral health day tx, per hour | Individual or group activities and treatment provided in a setting that also provides education. Day Treatment programs provide structure, therapy and comprehensive support services with meals, transportation to and from the site, recreation, etc. These services are goal oriented and time limited to facilitate the child's return to his/her home school or other public school program. These are providers whose programs meet the requirements of HSS 40 and provide at least 2 hours of treatment per day. | 112.00 | | Daily |

These programs are often referred to as Medical Day Treatment or Partial Hospital Programs. Day Treatment plans in a T-19 program must be reviewed and signed-off

| Service Name / ID |) | | Set IPN Rate | Avg IPN Rate | Billing Un |
|----------------------------|--|--|-----------------|-----------------|------------|
| Credentic | als: Mental Health Day Treatment | on by a Psychiatrist or Psychologist. License. Agency National Provider Identifier (NPI). | | | |
| 5176 H2012 Credentic | Day Treatment - Summer School Rate Behavioral health day tx, per hour | Same service description as day treatment, except the rate is reduced as the school day is short during summer school. | | | Daily |
| 5174 H2012 Credentia | Day Treatment Specialized (Non-Medic Behavioral health day tx, per hour | Day treatment program for children with specialized needs, i.e. developmentally, physically and medically challenged, requiring additional and/or specialized staffing. This is a short-term (up to 90 days) placement during which time an Individual Education Plan (I.E.P.) needs to be developed as updated by parent/legal guardian and school district to meet long-range special education needs. This service must be prior authorized. | | 85.00 | Daily |
| 5580 T1999 | Discretionary Funds Misc therapeutic items & supplies NOS | Discretionary funds are used to request miscellaneous services which are not a part of Plan of Care, particularly on a one-time emergent basis. Purposes for such expenses include incentive monies, rent/security deposit, utilities, household supplies/groceries, clothes, classes, books, workshops. As a general rule, Wraparound does not make mortgage payments, ongoing rent payments, car payments, car repair payments, home repair or remodeling payments, or purchase washers, dryers, refrigerators, stoves or any other major household appliances or furniture, carpeting, etc. The goal is to help families find resources in the community to obtain these items. (Refer to Wraparound Policy #15.) | 1.00 | | Total |
| Credentic | als: | | | | |
| 5557A H2024 | Employment Preparation and Placemen Supported employment, per diem | Employment Preparation and Placement Services are provided to a Wraparound, REACH, O'YEAH or FISS enrollee age 15-1/2 or older, or in rare cases, the parent or guardian of an enrollee, who is in need of assistance with obtaining and sustaining employment. This service is designed to assist the Service Recipient with acquiring paid employment. Payment for Employment Preparation and Placement services is "outcome based" with reimbursement being made upon achievement of each of three (3) phases or milestones. Duration of the service (three (3) phases combined) is anticipated to be six (6) months or less. Providers of Employment Preparation and Placement Services must offer all three phases of this service. | 400.00 | 400.00 | Total |

Rate Billing Unit

Avg IPN

The following services may not be provided concurrently with Employment Preparation and Placement:

- -On The Job Training
- -Independent Living Skills Training
- -Life Skills Training, Individual and/or Group

PHASE ONE - ASSESSMENT AND EMPLOYMENT PLAN: Services must be provided 1:1 or in groups of up to eight (8) individuals. Authorizations are typically 2-4 weeks in duration. This phase must include a minimum of eight attempted (scheduled) face to face meetings. The Assessment and Employment Plan may include a formal interview and/or completion of a formal written Assessment used to assess the Service Recipient's needs. As part of the Assessment Process, the Provider may begin training in the following areas in order to determine the Service Recipient's level of commitment, abilities and employment related training needs. This training may include the following topics:

- -Attendance and punctuality.
- -Personal appearance; grooming, hygiene, appropriate workplace dress, value of first impressions.
- -Communication and dispute resolution.
- -Networking.
- -Filling out a job application.
- -Resume creation.
- -Obtaining references.
- -Marketing oneself to an employer; identifying personal strengths and assets.
- -Dealing with an arrest and conviction record.
- -Employer expectations.
- -Taking time off.
- -Getting to and from the job.
- -What to expect when you get your first check (i.e., taxes and other withholdings).
- -Management of Service Recipient needs other than the above that were identified during the Assessment process.

Credentials:

Agency must have a written plan for the provision of the service including: assessment, training, job development, job placement and follow-up services. The Agency must identify expectations and participation requirements for the program, the criteria by which they will be measured, as well as participant conduct that could result in expulsion from the program.

Individual Direct Service Providers of this service must possess a High School Diploma or GED and must have a minimum three years work force experience and at least one year experience in providing same/similar type services;

| Service Name / ID | • | | Set IPN Rate | Avg IPN Rate | Billing Unit |
|----------------------|-------------------------------------|---|-----------------|-----------------|--------------|
| | OR | | | | |
| | | less, Finance or Human Resources with at least one year work experience. | | | |
| 5557C | Employment Preparation and Placemen | Employment Preparation and Placement Services are provided to a Wraparound, REACH, O'YEAH or FISS enrollee age 15-1/2 or older, or in rare cases, the parent or guardian of an enrollee, who is in need of assistance with obtaining and sustaining employment. This service is designed to assist the Service Recipient with acquiring paid employment. Payment for Employment Preparation and Placement services is "outcome based" with reimbursement being made upon achievement of each of three (3) phases or milestones. Duration of the service (three (3) phases combined) is anticipated to be six (6) months or less. Providers of Employment Preparation and Placement Services must offer all three phases of this service. The following services may not be provided concurrently with Employment Preparation and Placement: On The Job Training Independent Living Skills Training Life Skills Training, Individual and/or Group PHASE THREE - POST PLACEMENT SUPPORT: Services must be provided on a 1:1 basis. Authorizations are up to 12 weeks from the first date of employment with service intensity diminishing in proportion to the number of weeks post employment. if the Service Recipient is unsuccessful in retaining employment for 60 days, either due to voluntary or involuntary separation, the Provider is to contact the Care Coordinator to assess whether or not the Service Recipient is likely to benefit from continuing services. If the Service Recipient loses employment by no fault of their own (illness, injury, layoff, etc.) before 60 days, service reauthorization for Phase Two may be considered. | 700.00 | 700.00 | Total |
| | | Post Placement Support services may include: -Orientation of the Service Recipient/employee to his/her new job. -Assistance and direction regarding management of transportation needs. -Monitoring of job attendance, productivity and socialization (getting along with others on the job). -Monitoring employer satisfaction with the Service Recipient/employee's job performance. -Assisting the Service Recipient with opening a bank account. -Consultation with the employer regarding development of natural supports within the workplace in order to promote satisfactory job performance and sustained employment with the goal of "fading" the need for job support from the Provider, as | | | |

the Service Recipient/employee independence increases and the benefit of natural

700.00

700.00

Total

supports is realized.

H2024 Supported employment, per diem

Credentials:

Agency must have a written plan for the provision of the service including: assessment, training, job development, job placement and follow-up services. The Agency must identify expectations and participation requirements for the program, the criteria by which they will be measured, as well as participant conduct that could result in expulsion from the program.

Individual Direct Service Providers of this service must possess a High School Diploma or GED and must have a minimum three years work force experience and at least one year experience in providing same/similar type services;

OR

A Bachelor's Degree in Business, Finance or Human Resources with at least one year work experience.

5557B Employment Preparation and Placemen H2024 Supported employment, per diem

Employment Preparation and Placement Services are provided to a Wraparound, REACH, O'YEAH or FISS enrollee age 15-1/2 or older, or in rare cases, the parent or guardian of an enrollee, who is in need of assistance with obtaining and sustaining employment. This service is designed to assist the Service Recipient with acquiring paid employment. Payment for Employment Preparation and Placement services is "outcome based" with reimbursement being made upon achievement of each of three (3) phases or milestones. Duration of the service (three (3) phases combined) is anticipated to be six (6) months or less. Providers of Employment Preparation and Placement Services must offer all three phases of this service.

The following services may not be provided concurrently with Employment Preparation and Placement:

- -On The Job Training
- -Independent Living Skills Training
- -Life Skills Training, Individual and/or Group

PHASE TWO - JOB DEVELOPMENT AND ACQUISITION: Services must be provided on a 1:1 basis. Authorizations are typically 1 to 8 weeks (Hours per week varies). If after 12 weeks, if the Service Recipient has not obtained employment, the Provider is to contact the Care Coordinator to assess whether or not the Service Recipient is likely to benefit from continuing services.

Job Development and Acquisition Services may include:

- -Continuation of "Pre-Employment Training" activities from Phase One.
- -Identification of potential jobs and/or employers that have new or imminent job openings that are consistent with the Service Recipient's job goal(s) and abilities.
- -Job search activities performed on behalf of the Service Recipient.
- -Pre-employment contact by Provider with potential employers to identify job opportunities that are relevant to the Service Recipient.
- -Negotiation of job restructuring and/or job creation for the Service Recipient with a

| Service Name / ID | | | Set IPN Rate | Avg IPN Rate | Billing Unit |
|-------------------------------|---|--|---------------------|-----------------|--------------|
| | | potential employer. -Activity associated with the development of the employer's capacity to provide "natural supports" to aid the Service Recipient in job retention (natural supports are employer resources/personnel who can offer job training, support, mentoring and encouragement to the new employee). -Obtaining and completing job applications. -Accompanying the Service Recipient to job interviews. -Service Recipient specific pre-employment counseling and advocacy services. | | | |
| Credentials: | services. The Agency must | plan for the provision of the service including: assessment, training, job development, job placen identify expectations and participation requirements for the program, the criteria by which they wild result in expulsion from the program. | _ | | |
| | experience and at least one y OR | oviders of this service must possess a High School Diploma or GED and must have a minimum the year experience in providing same/similar type services; | nree years work for | ce | |
| 5308 Enh S5145 Fos dier | nanced Foster Care-Level 2 ter care, therapeutic, child, per | Designed for youth who no longer require intensive services due to progress made in their treatment foster home, but continue to require skilled support of a professional team. These youth experience occasional disruptions in the home, school, and community settings. Twice monthly individual and family therapy within the treatment foster home. | 75.45 | | Daily |
| Credentials: | Child Placing Agency Licen | ise | | | |
| | reptional Foster Care-Level 4 ter care, therapeutic, child, per m | Designed for youth who traditionally were placed in residential treatment or other institutions. Today, through extensive services, many of these youth may be successfully maintained in a family setting. Highly skilled treatment foster parents teamed with experienced therapists are prepared to address severe disruptions in the home, school, and community. A significant strength of the program is weekly therapy with the birth family. | 118.32 | | Daily |
| 5309B | | program is weekly therapy with the orth family. | | | |
| Credentials: | Child Placing Agency Licen | ise | | | |
| 5701 Fan H0041 Fos | nily Connections Groups ter care, child, non-therapeutic | Family Connections Groups is an intervention program for youth age 10 and older and their parent/guardian. Sessions are offered for girls only, boys only and co-ed groups. | 35.00 | | Hour |
| | | Page 21 -575 | | | |

Family Works is an intensive treatment program bringing Meta House's Gender Responsive Residential Treatment philosophy to an outpatient setting. The program includes life, parenting and job skills development and comprehensive case management. Meta House Case Managers work with the staffs of the W-2 and child welfare agencies to assist women to meet the requirements of both systems, while receiving the necessary treatment and support for their ongoing recovery. Included in this approach as needed are: adult health education, AODA education, case management, child care, developmental and psychological evaluations, psychiatric evaluations and medical management, educational and vocational assessment, family reunification services, literacy classes, GED/HSED training, health classes,

| Service Name / ID | | Set II Rate | | Avg IPN Rate | Billing Unit |
|-----------------------------------|--|---|---------|-----------------|--------------|
| | | individual, family and group therapy, job readiness preparation, Meta-Step transitional employment, Nurturing program designed for mothers with a substance use disorder, parenting and child development classes, permanent employment, prenatal and post-natal care coordination, relapse prevention, job retention services, and supervised visitation. | | | |
| | | This sole-provider service must be pre-authorized by the program authority. | | | |
| Credentials: | | | | | |
| 5166 Fema H0015 Alcol outpt | le Family Systems Intervention nol and/or drug svcs intensive | Female Family Systems Intervention (FFSI) is an In-Home Program for girls between the ages of 13 and 18 who are living at home. This service is designed to help girls learn to avoid risky behaviors such as: sexual activities, usage of drugs or alcohol and criminal activity. The program also helps girls and their parent/guardian learn to communicate more effectively. FFSI includes eight weeks of in-home services provided by an Intervention Specialist trained in FFSI. Youth have to be living at home to participate in the program. | | | Hour |
| | | The program consists of five modules: 1. Building Trust 2. Family Structure and Communication (sessions 2 and 3) 3. Risk Reduction (sessions 4 and 5) 4. Building A Future 5. Maintaining Strong Family Ties (sessions 7 and 8) | | | |
| | | Families who complete the program receive post program follow-up at 1, 4 and 9 months following completion of the program. | | | |
| H2019 Thera per 1: | Intervention Specialist certifie | ed by the Medical College of Wisconsin and approved by Wraparound Milwaukee or Children's Court Services the Medical College of Wisconsin shall be maintained at the agency. | s Netwo | ork. | |
| | Bachelors degree or above in | | | | |
| | Resume substantiating educat | ion and experience working with youth and families. | | | |
| | Copies of Degree and resume | must be submitted prior to approval in the Network. | | | |
| 5390 Foste H0042 Foste diem | r Home Care r Care, non-therapeutic, per | Foster homes are licensed and must meet State (HSS-56) guidelines. Foster home care is an alternative living situation for children who cannot live with their families. | , | 27.00 | Daily |

| Service Name / ID | | Set IPN Rate | Avg IPN Rate | Billing Unit |
|---|--|-----------------|-----------------|--------------|
| Credentials: Foster Home License | Foster home care provides a home environment with a daily living routine and supervision. Rates may vary based on intensity of needs. Supportive services through the Provider Network are available as needed. Rate is individualized and must be pre-authorized on a case-by-case basis before service is requested on the Service Authorization Request. (Refer to Wraparound Policy #19.) | | | |
| Poster Home License | | | | |
| 5390A Foster Home Care-2nd Child Foster Care, non-therapeutic, per diem | Same as for Service Code 5390 This code is only used when a second child is in the same foster home but has a different rate than the first child. Aggie Hale, 11/9/11 | | 27.00 | Daily |
| Credentials: Same as for Service Code | 5390. | | | |
| 5393 Foster Home Licensing Family Assessment by Lic. Beh. Health Prof | To provide foster care recruitment and licensing. | 2500.00 | | Each |
| Credentials: Child Agency Placing Lice | ense | | | |
| Foster Home Maintenance Family Assessment by Lic Beh Health Prof | Foster Home Maintenance is intended to provide maintenance for La Causa and Fresh Start licensed regular foster homes being utilized by Wraparound enrolled children. These agencies provide regular contact and support to foster parents to maintain licensing requirements and improve quality of care. | 42.50 | | Hour |
| Credentials: Child Agency Placing Lice | ense | | | |
| 5120 Group Counseling and Therapy Therapeutic Behavioral Services | NOTE: APPLICATIONS ACCEPTED FOR ACTIVE-ONGOING GROUPS ONLY. Goal directed face-to-face psychotherapeutic intervention with the child/family member(s) and/or other caregivers who are treated at the same time in a certified outpatient mental health setting. Focus is on improved peer relationships, communication skills, anger control, improved problem-solving skills, etc. A description of the group identifying the target population, objective of the group, and days/times the group meets must be included in the application to provide this service. | 8.00 | | Quarter Hou |
| | and of the state o | | | |
| 90853 Group Psychotherapy | aujo omico mo gicup moto mast co motato m mo approanten to provide une control. | | | |

- Licensed Clinical Social Worker
- Licensed Marriage and Family Therapist Licensed Professional Counselor

180.00

Daily

- Licensed Psychologist
- Psychiatrist
- (2) Music, Art, Dance Therapist with Wisconsin Psychotherapy License
- (3) Other Qualified Professionals in a Certified Outpatient Psychotherapy Clinic
- Practitioner with a status Approval (3000 hour) Psychotherapy Letter issued by the Wisconsin Department of Health Services, Division of Quality Assurance (DHS, DQA).

Providers of Group Therapy services must also satisfactorily complete the Wraparound Milwaukee Practitioner Credentialing process and have a National Provider Identifier (NPI).

5400 H0018 Group Home Care

resid, non-hospital

Behavioral Health, short-term

A licensed group home providing care and 24-hour supervision as an alternative living situation for children who temporarily cannot

live with their families.

Credentials:

A Group Home License under Wisconsin State Statutes 48.60-48.77 must be submitted in the application process, along with documentation from the State Bureau of Fiscal Services establishing the daily rate. Such documentation must also be attached to any increase in the daily rate to justify the rate increase.

A description of the treatment/activities provided in the group home must be provided in the application process.

All group homes in the Wraparound Provider Network must meet Wisconsin Medicaid requirements as a crisis stabilization provider regarding staffing, documentation and supervision.

Group homes must have a staff member qualified under HFS 34.21 (3)(b) 1-8 available for consultation in person or by phone at all times the program is in operation.

Group homes must document daily progress notes relevant to their provision of mental health crisis services.

Group homes shall maintain accurate and current documentation of all staff members' qualifications, including copies of degrees, training certificates, licenses, etc. and shall verify that all staff meet the minimum requirements listed in HFS 34.21 (3)(b) 1-19. All other requirements relevant to hiring under caregiver law in Wisconsin apply. Supervision and training shall be provided as follows:

- a) Volunteers shall be supervised by an employee who qualifies under (3)(b) 1-8.
- b) Staff not qualified under (3)(b) 1-8, or who do not have 3000 hours of supervised clinical experience, shall receive a minimum of 1 hour of clinical supervision for every 30 hours of face-to-face emergency mental health services they provide.
- c) Staff qualified under (3)(b) 1-8 who have 3000 hours of supervised clinical experience shall participate in a minimum of 1 hour of peer clinical supervision for every 120 hours of face-to-face emergency mental health services they provide.
- d) Day to day clinical supervision and consultation shall be provided by a mental health professional qualified under (3)(b) 1-8.
- e) All clinical supervision shall be documented, and this documentation shall be maintained on site.
- f) Group homes shall provide program orientation for all new staff and volunteers. Staff with less than 6 months of experience shall complete a minimum of 40 hours of documented orientation during their first 3 months. Staff with 6 or more months of experience shall complete a minimum of 20

| Service Name / II |) | | Set IPN Rate | Avg IPN Rate | Billing Unit |
|----------------------|---|---|-----------------|-----------------|--------------|
| | hours of documented orientation in the first 3 months. Volunteers shall complete a minimum of 40 hours of orientation before working directly with clients. g) Group homes shall provide a least 8 hours of training to regular staff, per year, and keep documentation of this training. 5403 Group Home Crisis Supervision 70 Hour | | | | |
| 5403 S9484 | Group Home Crisis Supervision Crisis Intervention MH services, | Clinical supervision of group home staff as required under HFS 34.21 (3)(b) 1-19. This supervision may include direct review, assessment and feedback regarding each program staff member's delivery of emergency mental health services. Clinical supervision is accomplished by one or more of the following means: 1) individual sessions with staff members to review cases and assess performance; 2) individual on-the-job observation of staff during which the supervisor assesses, teaches and gives advice regarding the staff member's performance; group meetings. All such supervision must be documented in writing in the form of an ongoing log, monthly summary, etc. This service is reimbursed separately only for group homes who must contract for this service with a clinician specifically to meet the HFS standards for crisis billing. Group homes with HFS-qualified MSW clinicians on staff are not | 70 | | Hour |
| Credenti | als: The required credentials an | e a Masters level, 3000+ hour clinician with experience in working with DD and SED children. | | | |
| 5402 H0018 | | | | 160.00 | Daily |
| Credenti | State Bureau of Fiscal Serv | | | | |
| | A description of the treatm | ent/activities provided in the group home must be submitted in the application process. | | | |
| | documentation and superv Group homes must have a | sion. | | - | |
| | Group homes must docum Group homes shall mainta licenses, etc. and shall veri | n accurate and current documentation of all staff members' qualifications, including copies of degrees, fy that all staff meet the minimum requirements listed in HFS 34.21 (3)(b) 1-19. All other requirements | _ | | |
| | b) Staff not qualified und supervision for every 30 hoc) Staff qualified under (| pervised by an employee who qualifies under (3)(b) 1-8. ler (3)(b) 1-8, or who do not have 3000 hours of supervised clinical experience, shall receive a minimu ours of face-to-face emergency mental health services they provide. 3)(b) 1-8 who have 3000 hours of supervised clinical experience shall participate in a minimum of 1 hours of supervised clinical experience. | | | |

supervision for every 120 hours of face-to-face emergency mental health services they provide.

| Service Name / ID | | | Set IPN Rate | Avg IPN Rate | Billing Unit |
|------------------------------------|---|---|---------------------|-----------------|--------------|
| | e) All clinical supervision f) Group homes shall prov minimum of 40 hours of doc hours of documented orienta clients. | ervision and consultation shall be provided by a mental health professional qualified under (3)(b) 1-shall be documented, and this documentation shall be maintained on site. ide program orientation for all new staff and volunteers. Staff with less than 6 months of experience umented orientation during their first 3 months. Staff with 6 or more months of experience shall continue in the first 3 months. Volunteers shall complete a minimum of 40 hours of orientation before value a least 8 hours of training to regular staff, per year, and keep documentation of this training. | e shall complete a | m of 20 | |
| 5132 High H2028 Sex (| Risk Counseling and Therapy Offender Treatment Service | Face-to-face psychotherapy for high risk and/or abuse-specific populations (an individual and/or family/caregiver) requiring skilled and sensitive interventions. Such high risk populations include, but are not limited to, youth with a history of sexual/physical abuse, victimization, eating disorders, sexual orientation and gender identity concerns. Agencies wishing to provide the service must identify the target population at the time of application to provide the service. | 20.00 | | Quarter Hour |
| Credentials: | staff. Qualified Psychothera | n Risk Counseling and Therapy are subject to review and approval by the Wraparound Milwaukee pists must also provide supporting documentation (ie: resume; training certificates; etc.) that details me equivalent) experience working with the target high risk population they have identified in their herapy services. | s any additional tr | raining | |
| | Licensing Requirement: (1) Wisconsin Licensed Pra • Licensed Clinical Socia • Licensed Marriage and • Licensed Professional C | Family Therapist | | | |
| | Providers of High Risk Cour | apist with Wisconsin Psychotherapy License asseling and Therapy services must also satisfactorily complete the Wraparound Milwaukee Practition | oner Credentialin | g | |
| 5165 Home H2019 Thera per 1: | process and have a National e-Based Behavioral Mgm-Aide apeutic behavioral service, 5 min | As part of the Home-Based Management Team and under the direction of the Home-Based Behavioral Management Clinical Lead, the Home-Based Behavioral Management Aide will assist the client and family with tasks related to the client's daily living, behavior management, and self-care needs. NOTE: The Home-Based Behavioral Management Team may include the Home-Based Behavioral Management Clinical Lead and the Home-Based Behavioral Management Technician or the Home-Based Behavioral Management | 30.00 | | Hour |
| Credentials: | | Aide. residential setting, which may include group home, residential care center, shelter, or rehab center At least one year of experience must be with Developmentally Disabled clients. | , serving children | ., | |

| Service Name / ID | | | Set IPN Rate | Avg IPN Rate | Billing Unit |
|-------------------------------|---|--|---------------------|-----------------|--------------|
| | | gh School Diploma. Agency must keep a copy of the diploma on file. | | | |
| H2019 The | ne-Based Behavioral Mgm-Lead erapeutic behavioral service, 15 min | This service is designed for children with a dual diagnosis of Developmental Disability and Serious Emotional Disorders, i. e. Autism, who present with behavioral challenges in their home, school and community and are at risk for Residential Care. | 70.00 | | Hour |
| Credentials: | assess needs of youth and fam Management Technician. Co | Masters level clinician with one year experience working with Developmentally Disabled clientally to develop a behavioral treatment plan in coordination with the Plan of Care and IEP and supplies of Masters Degree and documentation of one year of experience working with the Developing prior to approval in the Network. | ervise the Behavio | | |
| H2019 The | ne-Based Behavioral Mgm-Technic trapeutic behavioral service, 15 min | This service is designed for children with a dual diagnosis of Developmental Disability and Serious Emotional Disorders (i.e. Autism) who present with behavior challenges in their home, school and community and are at risk for Residential Care. The behavioral management technician will be responsible for training the parent/s or caretaker (and possibly teacher/s at the child's school) on the use of specific behavioral approaches, to model these approaches and provide feedback and support on the application of the techniques (under the direction of the Lead Behavioral Management Staff Member). | 50.00 | | Hour |
| Credentials: | Disabled clients. This person and family in implementing the Providers of this service must | wice must possess a BS degree in a Human Service field and at least six months experience working must be supervised by the Clinical Lead (as described in Service Code 5163) and will be directly the behavioral treatment plan in the home, school and community. Submit copies of a human service degree and verification of 6 months of experience working with the black of | y involved with the | child | |
| H2015 Con | Disabled population prior to a use Mgmt Services in Support Support s, per 15 min | Includes services to the family or caregiver to support the child/children identified in the case plan to allow them to return to or remain in the home. Includes teaching skills such as budgeting, money management, cooking, cleaning, etc., to the child and/or caregiver. May include providing chore services. | 23.00 | | Hour |
| S5130 Hor | memaker services NOS | | | | |
| Credentials: | | D. Basic math and money management skills; physical ability to assist in cleaning/basic househousehousehousehousehousehousehouse | old chores. | | |
| 5595 Hou H2015 Con svcs | nsing Assistance inprehensive comm support | mit copy of H.S. Diploma or G.E.D. Certificate to Wraparound (Maintain in agency file only.) Assisting families to locate and secure affordable and safe housing as needed, including obtaining or providing housing referral services, identifying relocation needs, mediating disputes with landlord, and other identified housing needs. | 25.00 | | Hour |

| Service Name / ID | | | Set IPN Rate | Avg IPN Rate | Billing Unit |
|----------------------|---|--|---------------------|-----------------|--------------|
| 5595 H2015 | Housing Assistance Comprehensive Comm. Support Svcs, per 15 min | Assisting families to locate and secure affordable and safe housing as needed, including obtaining or providing housing referral services, identifying relocation needs, mediating disputes with landlord, and other identified housing needs. | 25.00 | | Hour |
| Credentia | • | .E.D. Familiarity with basic lease agreements. Knowledge of subsidized housing programs that offers the City of Milwaukee Housing Authority. | er housing assistar | ice and | |
| | NOTE: Do NOT need to su | abmit copy of H.S. Diploma or G.E.D. Certificate to Wraparound (Maintain in agency file only.) | | | |
| 5161 H2019 | In-Home Case Aide Therapeutic behavioral service, per 15 min | The In-Home Case Aide is always the second person on a two-person team. A Medicaid reimbursable Lead Therapist (see code 5160) must supervise the Case Aide. (The Case Aide and Lead Therapist must be from the same agency). | 30.00 | | Hour |
| | | Medicaid In-Home Treatment is intensive, time limited therapy for a youth with a SED diagnosis (Serious Emotional Disorder) and/or their family/caregiver. Services are provided in the client's home or in rare instances a community-based setting (i.e. when a neutral location is required). Youth served may be at imminent risk of out-of-home placement including a Residential Care Center or a psychiatric hospital, or require this service as an alternative to continued placement in one of those settings. All services provided must be directly related to the client's emotional/behavioral needs. Appropriate services may deal with family issues related to the promotion of healthy functioning, behavior training and feedback to the family. Services that are primarily social or recreational are not reimbursable. Identified needs, measurable goals and the intensity of treatment should be consistent with the youth/family plan of care. Intensive In-home therapy is generally a "family all" multi-systemic focused service. It is NOT acceptable practice to use this code to provide individual or family counseling/psychotherapy. (See Wraparound In-Home Policy for more information.) | | | |
| H2033 | Multi-systemic therapy for juveniles | | | | |
| Credentia | *************************************** | ssess one of the following credentials: | | | |
| | AODA counselor or profess | nimum of a BA/BS Degree in a behavioral health field, a registered nurse, an occupational therapist sional with equivalent training and at least 1000+ hours of supervised clinical experience working in ally and behaviorally disturbed youth/children/families; | | | |
| | or | | | | |

(2) An individual with minimum of 2000+ hours of supervised clinical experience (without a degree) working in a program whose primary clientele are

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60.00

Hour

emotionally and behaviorally disturbed youth/children/families.

DOCUMENTATION REQUIREMENTS

Copy of the individual's degree. Proof of experience must be documented in one or more letters of reference supporting the supervised experience or a resume with written corroboration of prior experience by current employer.

5160 H2019 In-Home Lead Medicaid Therapeutic behavioral service, per 15 min

Medicaid In-Home Treatment is intensive, time limited therapy for a youth with a SED diagnosis (Serious Emotional Disorder) and/or their family/caregiver. Services are provided in the client's home or in rare instances a community-based setting (i.e. when a neutral location is required). Youth served may be at imminent risk of out-of-home placement including a Residential Care Center or a psychiatric hospital, or require this service as an alternative to continued placement in one of those settings. All services provided must be directly related to the client's emotional/ behavioral needs. Appropriate services may deal with family issues related to the promotion of healthy functioning, behavior training and feedback to the family. Services that are primarily social or recreational are not reimbursable (notwithstanding that appropriate clinical interventions such as play therapy may be employed). Intensive In-home therapy is generally a "family all" multi-systemic focused service, although individual or family counseling/psychotherapy sessions are permissible. Identified needs, measurable goals and the intensity of treatment should be consistent with the youth/family plan of care. (See Wraparound In-Home Policy for more information.)

H2033 N

Multi-systemic therapy for juveniles

Credentials:

In-Home Lead services can be provided by:

- (1) Wisconsin Licensed Practitioners Practicing Privately or in a Wisconsin Certified Clinic.
- Licensed Clinical Social Worker
- Licensed Marriage and Family Therapist
- · Licensed Professional Counselor
- Licensed Psychologist
- Psychiatrist
- (2) Music, Art, Dance Therapist with Wisconsin Psychotherapy License
- (3) Other Qualified Professionals in a Certified Outpatient Psychotherapy Clinic
- Practitioner with a status Approval (3000 hour) Psychotherapy Letter issued by the Wisconsin Department of Health Services, Division of Quality Assurance (DHS, DQA).

Providers of In-Home Medicaid Lead services must also satisfactorily complete the Wraparound Milwaukee Practitioner Credentialing process and

| Service Name / ID | | | Set IPN Rate | Avg IPN Rate | Billing Unit |
|----------------------|--|--|-----------------|-----------------|--------------|
| | have a National Provider Ide | entifier (NPI). | | | |
| 5569 H2014 | Independent Living Skills Training Skills training & development, per 15 min | Independent Living Skill Training ages 16 and older who need to develop the skills to live independently. This service is appropriate for youth who will be moving into independent living arranged for through SAIL or the Adult Housing Program and youth participating in Supported Independent Living through Wraparound Milwaukee. Independent Living Skills Training differs from Supported Independent Living, as there is no component associated with the acquisition of housing or supervision of youth at their place of residence. Transportation is the responsibility of the referring agency. | Varies | 79.00 | Daily |
| | | Independently Living Training is an intensive (6 hr/day), short-term program with a structured curriculum that addresses the development of skills needed for independent living and obtaining sustainable employment. The curriculum is designed to promote skill development in the following areas: - Setting Up Living Quarters - Meal Preparation (Nutrition/Meal Planning; Mean Preparation and Clean Up; Food Storage) - Money Management (Budgeting/Savings/Spending/Credit; Bank Account Setup and Management; Pay Check Deductions; Paying Taxes) - Home Management and Safety - Insurance Coverage /Health and Property - Transportation - Community Resources (food, assistance, health care) - Career Goals and Planning - Communications Skills (particularly in the job setting) - Job Training (with minimum wage payment) - How to Find Employment/Housing | | | |
| | | Youth appropriate for this services would: - At least 16 year of age - Have an IQ of 70 or above - Be independent in daily self-care activities - Be in need of skill training associated with living on their own and obtaining employment - Be capable of managing their own living quarters - Be capable of taking public transportation (ie: city bus) - Nearing age 18 and preparing to received Supported Independent Living or have a plan in place for moving into their own apartment or minimally supervised living arrangement with would occur just prior to or immediately following their 18th birthday | | | |

| Behavioral health counseling & Goal directed, face-to-face psychotherapeutic intervention provided to an individual therapy, per 15 min and/or family/caregivers. Services may be interactive or insight oriented and are provided by a licensed psychologist with a Ph.D. in an officed-based setting. Credentials: State of Wisconsin Psychologist License The clinician must also satisfactorily complete the Wraparound Milwaukee Practitioner Credentialing process and have a National Provider Identifier (NPI). Individual/Family Therapy-Office | Service Name / ID | | | | Set IPN Rate | Avg IPN Rate | Billing Unit |
|--|----------------------|---------------------|--|--|-------------------------------------|-----------------|--------------|
| Independent Living Skills Training: - Residential Care - Group Home or Foster Home Care (unless approved by Wraparound Administration) - Day Treatment - Daily Living Skills Training - Life Skills Training - Life Skills Training - Life Skills Training - Parent Assistance - Job Coach - Supported Wk Envir/Job Coach. Youth who complete the Independent Living Training Program may continue to receive Supported Wk Envir/Job Coach Services if additional job training is indicated and the youth is still enrolled in Myraparound. Credentials: This service is provided solely through St. Charles Youth and Family Services and all credentialing of service providers is managed by St. Charles with input from Wraparound Alliwaukce. The agency must be on or within 2 blocks of a Milwaukee County bus line. Agency requirements include: use of a standardized curriculum and a furnished "mock" or model apartment that allows youth to practice independent living skills. The furnished model apartment components must include to: a living room; bedroom; bathroom; kitchen with full or apartment size stove, full size refrigerator, and microwave; washer and dryer. The agency must also have onsite job training and as history of connecting youth to permanent jobs in the community washer and dryer. The agency must also have conduct pre and post tests with youth receiving this service and be able to provide outcome information for youth participating in the program. Programming must be offered Monday through Friday (exclusives of holidays) and provide no less than 4.5 hours, up to 6 hours of programming per day. Individual/Family Therapy Lie. Psycho Behavioral health counseling & hours, up to 6 hours of programming per day. Session Individual/Family Therapy 1:e. Psychologist License The clinician must also satisfactorily complete the Wraparound Milwaukce Practitioner Credentialing process and have a National Provider Identifier (NPI). Individual/Family Therapy-Office Goal directed, face-to-face psychotherapeutic intervention provided to a | | | | - Be able to participate in programming 6 hours a day, Monday through Friday | | | |
| Residential Care Group Home or Foster Home Care (unless approved by Wraparound Administration) - Day Treatment - Daily Living Skills Training - Life Skills Training - Life Skills Training - Parent Assistance - Job Coach - Supported We Envir/Job Envir-Job Envir- | | | | 1 , | | | |
| - Group Home or Foster Home Care (unless approved by Wraparound Administration) - Day Treatment - Daily Living Skills Training - Life Skills Training - Parent Assistance - Job Coach - Supported We Fenvir/Job Coach Youth who complete the Independent Living Training Program may continue to receive Supported Work Envir/Job Coach Services if additional job training is indicated and the youth is still enrolled in Wraparound. Credentials: This service is provided solely through St. Charles Youth and Family Services and all credentialing of service providers is managed by St. Charles with input from Wraparound Milwaukee. The agency must be on or within 2 blocks of a Milwaukee County bus line. Agency requirements include: use of a standardized curriculum and a furnished "model apartment that allows youth to practice independent living skills. The flumished model apartment components must include to: a living room; bedroom; bathroom; kitchen with full or apartment size stove, full size refrigerator, and microwave; washer and dryer. The agency must also have onsite job training and as history of connecting youth permanent jobs in the community. The agency must conduct pre and post tests with youth receiving this service and he able to provide on less than 4.5 hours, up to 6 hours of programming must be offered Monday through Friday (exclusive of holidays) and providen to less than 4.5 hours, up to 6 hours of programming per day. Individual-Family Therapy Lice Psychologist License The clinician must also satisfactorily complete the Wraparound Milwaukee Practitioner Credentialing process and have a National Provider Identifier (NPI). Individual-Family Therapy-Office The clinician must also satisfactorily complete the Wraparound Milwaukee Practitioner Credentialing process and have a National Provider | | | | | | | |
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| furnished "mock" or model apartment that allows youth to practice independent living skills. The furnished model apartment components must include to: a living room; bedroom; bathroom; kitchen with full or apartment size stove, full size refrigerator, and microwave; washer and dryer. The agency must also have onsite job training and as history of connecting youth to permanent jobs in the community. The agency must conduct pre and post tests with youth receiving this service and be able to provide outcome information for youth participating in the program. Programming must be offered Monday through Friday (exclusive of holidays) and provide no less than 4.5 hours, up to 6 hours of programming per day. Individual/Family Therapy Lic. Psycho Behavioral health counseling & and/or family/caregivers. Services may be interactive or insight oriented and are provided by a licensed psychologist with a Ph.D. in an officed-based setting. Credentials: State of Wisconsin Psychologist License The clinician must also satisfactorily complete the Wraparound Milwaukee Practitioner Credentialing process and have a National Provider Identifier (NPI). | Credential | s: | * | , , | aged by St. Charle | es with | |
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| Individual/Family Therapy Lic. Psycho Behavioral health counseling & Goal directed, face-to-face psychotherapeutic intervention provided to an individual therapy, per 15 min Goal directed, face-to-face psychotherapeutic intervention provided to an individual and/or family/caregivers. Services may be interactive or insight oriented and are provided by a licensed psychologist with a Ph.D. in an officed-based setting. State of Wisconsin Psychologist License The clinician must also satisfactorily complete the Wraparound Milwaukee Practitioner Credentialing process and have a National Provider Identifier (NPI). Individual/Family Therapy-Office Behavioral health couns & therapy Goal directed, face-to-face psychotherapeutic intervention provided to an individual and/or family/caregivers. Services may be interactive or insight oriented and are provided in an office-based setting. Behavioral health counseling & | | | to: a living room; bedroom; must also have onsite job trai | bathroom; kitchen with full or apartment size stove, full size refrigerator, and microwave; washer ining and as history of connecting youth to permanent jobs in the community. The agency must connect the community of the community of the community. | and dryer. The agonduct pre and pos | ency t tests | |
| H0004 Behavioral health counseling & Goal directed, face-to-face psychotherapeutic intervention provided to an individual and/or family/caregivers. Services may be interactive or insight oriented and are provided by a licensed psychologist with a Ph.D. in an officed-based setting. Credentials: State of Wisconsin Psychologist License The clinician must also satisfactorily complete the Wraparound Milwaukee Practitioner Credentialing process and have a National Provider Identifier (NPI). 5100 Individual/Family Therapy-Office Behavioral health couns & therapy Goal directed, face-to-face psychotherapeutic intervention provided to an individual and/or family/caregivers. Services may be interactive or insight oriented and are provided in an office-based setting. Behavioral health counseling & | | | Monday through Friday (excl | lusive of holidays) and provide no less than 4.5 hours, up to 6 hours of programming per day. | | | |
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| (NPI). 5100 Individual/Family Therapy-Office Behavioral health couns & therapy Goal directed, face-to-face psychotherapeutic intervention provided to an individual and/or family/caregivers. Services may be interactive or insight oriented and are provided in an office-based setting. Behavioral health counseling & | Credential | s: | State of Wisconsin Psycholog | gist License | | | |
| Individual/Family Therapy-Office Behavioral health couns & therapy Goal directed, face-to-face psychotherapeutic intervention provided to an individual and/or family/caregivers. Services may be interactive or insight oriented and are provided in an office-based setting. Behavioral health counseling & | | | | actorily complete the Wraparound Milwaukee Practitioner Credentialing process and have a National Complete the Wraparound Milwaukee Practitioner Credentialing process and have a National Complete the Wraparound Milwaukee | onal Provider Iden | tifier | |
| | 5100 H0004 | Individu Behavio | ` / | and/or family/caregivers. Services may be interactive or insight oriented and are | 16.00 | | Quarter Hour |
| | | Behavio | oral health counseling & | - - | | | |
| | | | _ | | | | |

| Service Name / ID | | Providers of Individual/Family Therapy services must also satisfactorily complete the Wraparound Milwaukee Practitioner credentic have a National Provider Identifier (NPI). ters Iguage or oral interpretive Interpretive services provided to the child/family - may be bi-lingual, hearing impaired, or other. Two agency letters of reference. | Set IPN Rate | Avg IPN Rate | Billing Unit |
|----------------------|--|---|---------------------|-----------------|--------------|
| Credentia | uls: Individual/Family Therapy | services can be provided by the following qualified psychotherapists: | | | |
| | Licensed Clinical SociLicensed Marriage and | al Worker I Family Therapist | | | |
| | (2) Music, Art, Dance The | erapist with Wisconsin Psychotherapy License | | | |
| | Practitioner with a stat Assurance (DHS, DQA). | us Approval (3000 hour) Psychotherapy Letter issued by the Wisconsin Department of Health Serv | | | |
| | | | edentialing process | and | |
| 5600 T1013 | Interpreters Sign language or oral interpretive svcs | | | 40.00 | Hour |
| 5556 82023 | Job Internship Supported employment, per 15 min | This service provides a job internship for qualified youth and family members to prepare for future employment. An internship is an opportunity for employers to assess work skills and behaviors of prospective client-employees. On-the-job paid work experience will prepare the intern for employment within or outside of the company in which the internship is being completed. As a result of the internship, the | 5.75 | | Hour |
| | | which may include identification of the type of job best suited for the client, assessment of the intern's attendance and work performance, and ability of the intern | | | |
| | | will not be completed in one week. The duration of the internships may vary, but will | | | |
| | | Internal auditing procedures will include verification of hours worked via time sheets maintained by the agency. A detailed plan as to how the service will be delivered must be included in the application. This service is provided by one agency in the Integrated Provider | | | |
| | | | | | |

| | Set IPN Rate | Avg IPN Rate | Billing Uni |
|--|--|---|--|
| Network. | | | |
| | | | |
| | | | |
| Close relative providing alternative living situation for children who cannot reside in their parental home. The placement provides a structured, nurturing environment with a daily living routine and supervision. Application must be made with the Bureau of Child Welfare before Kinship funds are authorized by Wraparound. The Bureau of Child Welfare will perform the necessary investigative work and make the final determination of the family's eligbilility for ongoing Kinship Care payments. | 7.35 | | Daily |
| | | | |
| Life Skills Training Group provides support and training services for youth ages 14-18 a group setting of up to 6 clients with 1 staff member or up to 10 clients with 2 staff members. This service is designed to assist youth in acquiring the skills needed to support an independent lifestyle and promote an improved sense of self-worth. Life skills training is designed to assist youth with setting and achieving goals, learning independent living skills, demonstrating accountabilities and making goal directed decisions related to independent living, educational/vocational training and employment. | 16.00 | | Hour |
| Agencies are to establish an initial baseline regarding the client's skill and knowledge base related to the life skills training areas identified below. This may be accomplished through the use of a standardized assessment and client observation and is to be documented in the client record. | | | |
| In addition to goal setting activities, training in the following areas it to be provided based on the client's skills, needs and interests. | | | |
| 1. Money management and budgeting Opening and managing bank accounts (savings/checking accounts); balancing a checking account. Pro's and con's of charge cards. How interest is calculated for saving accounts. Interest payments on loans and charge accounts. Sales tax (taxable vs non-taxable commodities). Income taxes (need to file/help with). | | | |
| | Close relative providing alternative living situation for children who cannot reside in their parental home. The placement provides a structured, nurturing environment with a daily living routine and supervision. Application must be made with the Bureau of Child Welfare before Kinship funds are authorized by Wraparound. The Bureau of Child Welfare will perform the necessary investigative work and make the final determination of the family's eligibility for ongoing Kinship Care payments. Life Skills Training Group provides support and training services for youth ages 14-18 a group setting of up to 6 clients with 1 staff member or up to 10 clients with 2 staff members. This service is designed to assist youth in acquiring the skills needed to support an independent lifestyle and promote an improved sense of self-worth. 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Sales tax (taxable vs non-taxable commodities). Income taxes (need to file/help with). | Network. Close relative providing alternative living situation for children who cannot reside in their parental home. The placement provides a structured, nurturing environment with a daily living routine and supervision. Application must be made with the Bureau of Child Welfare before Kinship funds are authorized by Wraparound. The Bureau of Child Welfare will perform the necessary investigative work and make the final determination of the family's eligibility for ongoing Kinship Care payments. Life Skills Training Group provides support and training services for youth ages 14-18 a group setting of up to 6 clients with 1 staff member or up to 10 clients with 2 staff members. This service is designed to assist youth in acquiring the skills needed to support an independent lifestyle and promote an improved sense of self-worth. 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Sales tax (taxable vs non-taxable commodities). Income taxes (need to file/help with). |

Service

Set IPN Avg IPN
Name / ID

Rate Rate

Billing Unit

3. Skills related to living independently.

Setting up a household

Finding a place to live.

Signing a lease.

Setting up: telephone, electric, gas service.

Changing your mailing address.

- 4. Use of public transportation.
- 5. How to find a vocational training program (including finding financial assistance).
- 6. General information related to looking for a job, including filling out a job application, understanding paycheck withholdings, etc.

(Not to duplicate Service Code 5560 Supported Wk Envir/Job Coach.)

- 7. Obtaining medical care, choosing a doctor or dentist.
- 8. Basic information about caring for a pet (nutrition, proper discipline, veterinary services).
- 9. Entertaining guests.
- 10. Developing hobbies and leisure interests.
- 11. Conflict resolution training.
- 12. Use of community resources emergency and non-emergency (food pantries, shelters, medical, financial).

Providers of Life Skills Training are encouraged to develop a certificate or awards component as an incentive to clients who successfully complete the training

This service requires a core curriculum outlining the specific course study, which must be on file with and pre-approved by the Wraparound Milwaukee Provider Network.

Skills training & development, per 15 min

Credentials:

Requires minimum of High School diploma or equivalent with at least 2 years (full-time) experience in working with children or adults in an education, childcare or health care setting providing direct client services/care. Supervision/oversight to be provided by individual with a bachelor's degree (or above) in human services or education. Supervision can be demonstrated in routinely conducted review meetings (documented at least monthly) or co-signing of documentation related to client participation in programming. Agency providers with bachelor's degree or above are not required to have additional oversight.

5563B Life Skills Training - Individual Skills training & development

Life Skills Training Individual provides support and training services for youth ages 14-18 on an individual (1:1) basis. This service is designed to assist youth in acquiring the skills needed to support an independent lifestyle and promote an improved sense of self-worth. Life skills training is designed to assist youth with setting and achieving goals, learning independent living skills, demonstrating accountabilities and making goal directed decisions related to independent living,

32.00

Hour

Service

Set IPN Avg IPN
Name / ID

Rate Rate

Billing Unit

educational/vocational training and employment.

Agencies are to establish an initial baseline regarding the client's skill and knowledge base related to the Life Skills Training areas identified below. This may be accomplished through the use of a standardized assessment and client observation and is to be documented in the client record.

In addition to goal setting activities, training in the following areas it to be provided based on the client's skills, needs and interests.

1. Money management and budgeting

Opening and managing bank accounts (savings/checking accounts); balancing a checking account.

Pro's and con's of charge cards.

How interest is calculated for saving accounts. Interest payments on loans and charge accounts.

Sales tax (taxable vs non-taxable commodities).

Income taxes (need to file/help with).

- 2. Recognizing a bargain / comparison-shopping.
- 3. Skills related to living independently.

Setting up a household

Finding a place to live.

Signing a lease.

Setting up: telephone, electric, gas service.

Changing your mailing address.

- 4. Use of public transportation.
- 5. How to find a vocational training program (including finding financial assistance).
- 6. General information related to looking for a job, including filling out a job application, understanding paycheck withholdings, etc.

(Not to duplicate Service Code 5560 Supported Wk Envir/Job Coach.)

- 7. Obtaining medical care, choosing a doctor or dentist.
- 8. Basic information about caring for a pet (nutrition, proper discipline, veterinary services).
- 9. Entertaining guests.
- 10. Developing hobbies and leisure interests.
- 11. Conflict resolution training.
- 12. Use of community resources emergency and non-emergency (food pantries, shelters, medical, financial).

Providers of Life Skills Training are encouraged to develop a certificate or awards

| Service Name / ID | | | Set IPN Rate | Avg IPN Rate | Billing Unit |
|----------------------|--|---|--|-----------------|--------------|
| | | component as an incentive to clients who successfully complete the training | | | |
| | | This service requires a core curriculum outlining the specific course study, which must be on file with and pre-approved by the Wraparound Milwaukee Provider Network. | | | |
| | Skills training & development, per 15 min | | | | |
| Credentials. | childcare or health care sett above) in human services or | School diploma or equivalent with at least 2 years (full-time) experience in working with children ing providing direct client services/care. Supervision/oversight to be provided by individual with a reducation. Supervision can be demonstrated in routinely conducted review meetings (documente n related to client participation in programming. Agency providers with bachelor's degree or above | a bachelor's degree d at least monthly) | e (or or | |
| H2021 (| Mentoring Community-based wrap services, per 15 min | A mentor is a person engaged to develop a one-on-one relationship and function as both a positive role model and advocate for a child or adolescent in his/her family system. Children should be matched with mentors based on their strengths, needs and interests. A mentor could be involved in a variety of activities with a child, with the focus including recreation, special school projects, social skills and peer relationship building, personal care/hygiene/exercise, etc. Direction, consultation and support are be provided by the Care Coordinator/Safety Service Manager. The time commitment would vary dependent upon the child's needs and program requirements. | 22.00 | | Hour |
| (| Community-based wrap services | | | | |
| Credentials: | part of the application proce of the mentor's training cert | training is required of all staff prior to service. A 15-hour training curriculum must be submitted for ess. Owners must show evidence of training/certification/ education specific to mentoring in the applicate verifying this training must be submitted to the Provider Network upon the agency's request tentor's training certificate must be kept in his/her employee file. | plication process. | A copy | |
| 5575 T2003 | Mileage Adjustment Non emerg transport, per trip | This service code is used in conjunction with Service Codes 5572 and 5574 - Out of County Transportation - to pay for the per-mile portion of the trip charge. | 1.00 per m | i | Dollar |
| Credentials: | : | | | | |
| 5135 G0129 | Occupational Therapy Occupational Therapy | Occupational Therapy services must be medically necessary and related to an identified need(s) on the youth's plan of care. Occupational Therapy services are designed to: •Meet functional needs associated with serious emotional disturbance experienced by the enrolled youth •Help achieve a specific goal(s) for the enrolled youth where there is a reasonable expectation of achieving measurable improvement in a reasonable and predictable | 20.00 | | Quarter Hour |

period of time

•Address the enrolled youth's sensory integration needs

Services are delivered by an Occupational Therapist licensed by the State of Wisconsin.

Occupational Therapy services include: assessment of the enrolled youth's abilities to engage in age appropriate activity and respond appropriately to environmental events. The Occupational Therapy intervention includes treatment services that focus on the youth behavioral and mental health related needs in the areas of sensory integration, interpersonal and cognitive skill development; youth and parent education regarding management of the youth's needs; collaboration with parents, teachers and other members of the child and family team.

Services are generally provided in a clinic setting. Limited home based services for the purpose of assessment and family education may be reimbursed under this code. (Travel time is not reimbursable.)

Credentials:

State of Wisconsin Occupational Therapist License

National Provider Identifier

DOCUMENTATION REQUIREMENTS:

Occupational Therapy must be provided in accordance with a written treatment plan which is updated monthly or more often as needed.

The enrolled youth's needs are to be re-evaluated on an ongoing basis, and documentation must address progress made toward identified treatment goals.

The treatment goals and documentation of treatment results should specifically demonstrate that occupational therapy services are contributing to improvement in the enrolled youth's behavioral or mental health functioning at home, in the community or at school.

CONTINUTED AUTHORIZATION:

Authorization for services is managed on a month to month basis with services provided on average 1 to 3 hours per week. Requests for continued service authorization are to be based on progress made toward the enrolled youth's identified treatment goals. A one month transition period is appropriate when maximum benefit from the service has been achieved.

The therapist is responsible for forwarding monthly progress reports to the Care Coordinator for inclusion in the Child and Family Team review process.

5591 H2024 On The Job Training Supported employment, per diem

On the Job Training provides an opportunity for youth and family members to prepare for future employment through hands-on learning of hard and soft skills in a realistic, paid work environment. 1000

1000

Total

Service Components: On the Job Training (OJT) is a structured, time limited (30-120 days) service, which incorporates on the job evaluation, hard and soft skill training, and paid work experience performing meaningful (not contrived tasks or other "make work" activities) tasks. OJT is fundamentally work-oriented, but shall include formal and informal hard and soft skill training, as well as assessment. OJT may occur on or off site of the Provider and trainees shall be paid at minimum wage or higher and will be subject to all required payroll deductions. OJT shall build a credible work history by realistically reflecting the demands of regular, competitive employment, but will include intensive, structured supervision and feedback, with some accommodation for learning and trial and error. At monthly intervals, an evaluation of work performance will occur in Synthesis, to include a summary of:

- 1. Service Recipient hours scheduled, worked, and nature of work performed.
- 2. The Service Recipient's reaction to the work environment and the overall experience.
- 3. Observations by the employer of the Service Recipient's performance and interaction with other employees and the work environment.

On the Job Training will occur as follows:

On the Job Training-a combination of enrollee-paid work and classroom based hard and soft skill training to take place for a pre-approved period of time (30-120 days), rate, and schedule (number of hours). For enrollees who successfully complete this phase, a letter of recommendation must be obtained from the work site (not from an agency affiliated person, unless agency is OJT site). Service may conclude at this point.

If Provider facilitates employment of service recipient into a permanent position in a field related to training, provider shall receive an outcome-based payment of \$700 (conditions and reporting requirements follow Phase 3 of service code 5557, Employment Preparation and Placement) upon achieving the 60 day job retention milestone. Permanent employment at OJT site will qualify for the retention bonus, but time spent in OJT will not count toward the 60 day timeline.

The following services may not be provided concurrently with OJT:

- •Employment Preparation and Placement (EPP)
- •Independent Living Skills Training
- •Life Skills Training, Individual and/or Group

Outcome: Service Recipients increase hard and soft skills. Service Recipients establish a positive, verifiable work reference. Service Recipients identify interests, abilities, limitations, and areas for improvement as they relate to their job search and career development.

| Service Name / ID | | Set IPN Rate | Avg IPN Rate | Billing Uni |
|--------------------------|---|-----------------|-----------------|-------------|
| 5591 On The Job Training | On the Job Training provides an opportunity for youth and family members to prepare for future employment through hands-on learning of hard and soft skills in a realistic, paid work environment. | 1000 | 1000 | Total |
| | Service Components: On the Job Training (OJT) is a structured, time limited (30-120 days) service, which incorporates on the job evaluation, hard and soft skill training, and paid work experience performing meaningful (not contrived tasks or other "make work" activities) tasks. OJT is fundamentally work-oriented, but shall include formal and informal hard and soft skill training, as well as assessment. OJT may occur on or off site of the Provider and trainees shall be paid at minimum wage or higher and will be subject to all required payroll deductions. OJT shall build a credible work history by realistically reflecting the demands of regular, competitive employment, but will include intensive, structured supervision and feedback, with some accommodation for learning and trial and error. At monthly intervals, an evaluation of work performance will occur in Synthesis, to include a summary of: 1. Service Recipient hours scheduled, worked, and nature of work performed. 2. The Service Recipient's reaction to the work environment and the overall experience. 3. Observations by the employer of the Service Recipient's performance and interaction with other employees and the work environment. | | | |
| | On the Job Training will occur as follows: On the Job Training-a combination of enrollee-paid work and classroom based hard and soft skill training to take place for a pre-approved period of time (30-120 days), rate, and schedule (number of hours). For enrollees who successfully complete this phase, a letter of recommendation must be obtained from the work site (not from an agency affiliated person, unless agency is OJT site). Service may conclude at this point. If Provider facilitates employment of service recipient into a permanent position in a field related to training, provider shall receive an outcome-based payment of \$700 (conditions and reporting requirements follow Phase 3 of service code 5557, Employment Preparation and Placement) upon achieving the 60 day job retention milestone. Permanent employment at OJT site will qualify for the retention bonus, | | | |

•Independent Living Skills Training

The following services may not be provided concurrently with OJT:

•Employment Preparation and Placement (EPP)

•Life Skills Training, Individual and/or Group

Outcome: Service Recipients increase hard and soft skills. Service Recipients establish a positive, verifiable work reference. Service Recipients identify interests, abilities, limitations, and areas for improvement as they relate to their job search and career development.

Credentials:

Agency:

During the application process, applicants must show evidence of training/experience/education specific to the provision of this service. This service requires a pre-approved curriculum which must be on file with and pre-approved by the Wraparound Milwaukee Provider Network, outlining:

- 1.A copy of assessment materials
- 2. The specific course of study
- 3. Timelines: week 1, week 2, etc.
- 4. Scheduled number of hours per week and total for work, class/training, and face-to-face contact with Provider
- 5. Specific hard (technical and job specific, i.e. keyboarding) and soft skills (generic and universal: i.e. communication) to be developed, and how they will be evaluated, to include copies of any pre/post testing, etc.
- 6.Cost per participant
- 7. Expectations and participation requirements for the program, including participant conduct that could result in expulsion from the program.

Provider:

Individual Providers of this service must possess a High School Diploma or GED and must have at minimum three years work force experience and at least one year experience in related field. Individual Direct Service Providers of this service shall be pre-approved by Wraparound and must comply with Policy #057, "Caregiver Background Checks".

Reporting and Documentation Requirements:

Synthesis: Monthly summary of activities engaged in, including:

- 1. Hours scheduled/attended,
- 2. Hours scheduled attended class/training time
- 3. Dates and times of all face to face contact with Provider.
- 4.Feedback from job supervisor
- 5. For service recipients hired into permanent jobs, Synthesis reports documenting
- a) Employment verification/start of employment
- b) Employment retention

Rate: Program summary and rate to be approved by Wraparound prior to the start of services. Rate will be prorated for partial completion of Phase 1.

5522 Parent Assistance S5110 Home care training 30.00

Hour

A service to help the client/parent/caregiver acquire parenting skills and/or organize their household to be a clean, safe environment. The parent assistant teaches, models, and monitors appropriate child-rearing strategies and techniques and household management skills. Provides information on child development, age appropriate behavior and parental expectations, and childcare activities. Includes assisting the child and family with securing basic resources such as food, clothing, medicine, access to support groups, etc. Provides training and assistance with routine household tasks and household management techniques related to the caregiver

·Racine Correctional Institution

·Southern Oaks Girls School

The service includes transportation of the Wraparound enrolled youth to and from the correctional facility and supervision of the youth during the entire time of the visit with their parent.

Credentials: Staff with prior experience working with Wraparound youth desired.

| ervice Jame / ID | | | Set IPN Rate | Avg IPN Rate | Billing Unit |
|--------------------------|---|---|-----------------------|-----------------|--------------|
| | Prior experience as a Crisis Sta | abilization provider for Wraparound Milwaukee or equivalent training. | | | |
| | Valid Wisconsin Drivers Licer | nse (Drivers Abstract on file with agency) | | | |
| | Agencies must obtain 2 letters at the agency. | of reference regarding the provider's professional abilities. Reference letters are to be maintain | ined in the employee | es file | |
| | Crisis training of 40 hours for must be completed prior to the | staff with no prior crisis stabilization related experience or 20 hours for staff with 6 months of provision of this service. | prior experience. T | raining | |
| | _ | revention Intervention (CPI), Managing Aggressive Behavior (MAB) or a similar program aloravention and de-escalation training in the following areas: | ng with other related | | |
| | ·Wraparound crisis interventio | | | | |
| | Specific requirements associa | | | | |
| | | Iministrative rules related to patient rights and confidentiality of youth records. | | | |
| | | on techniques applicable to crisis situations. | NA 1 4 1 11 | | |
| 550B Parei | <u> </u> | responding to persons with emergency mental health needs who are experience a crisis or AOI | 50 |) . | Trin |
| | nt Correctional Facility VisitEsco emerg transport, per trip | Sole Provider: Integrity Family Services | 30 | | Trip |
| | | Use this service code to authorize payment for one adult escort (who is on | | | |
| | | incarcerated parent's approved visitation list) who accompanies a Wraparound | | | |
| | | enrolled youth PARENT CORRECTIONAL FACILITY VISITATION - Service Code 5550A. | | | |
| | | This code may only be authorized in conjunction with PARENT CORRECTIONAL FACILITY VISITATION - Service Code 5550A. | | | |
| Credentials: | | | | | |
| 5550C Parei 72003 Non | nt Correctional Facility VisitOrientemerg transport, per trip | Sole Provider: St. Rose Youth and Family Center | 70 | | Session |
| | | Use this service code to authorize payment for a ONE TIME ORIENTATION SESSION conducted with the youth referred for PARENT CORRECTIONAL FACILITY VISITATION - Service Code 5550A. | | | |
| | | This code may only be authorized in conjunction with PARENT CORRECTIONAL FACILITY VISITATION - Service Code 5550A. | | | |
| Credentials: | | | | | |
| | | Page 42 of 75 | | | |

| Service Name / II |) | | Set IPN Rate | Avg IPN Rate | Billing Unit |
|----------------------|--|---|---------------------|-----------------|--------------|
| 5313 S9485 | Placement Stabilization Center Crisis Intervention MH services, per diem | The purpose of the Placement Stabilization Center is to provide short-term placement for adolescents, ages 12-17, under a CHIPS order, who require temporary placement while steps for stabilizing placements are being explored. Placement stabilization centers are eight-bed group homes selected by and under contract to the Bureau of Milwaukee Child Welfare. They provide a safe and nurturing living environment in which adolescents can be stabilized, monitored and assessed for the most appropriate placement for permanency of the adolescents. Services provided include emotional, behavioral and social assessments of the child's functioning in a group setting, day-to-day structured programming, providing necessary transportation to medical appointments, evaluations and to school and to facilitate visitation between the adolescent and family. | 162.00 | | Daily |
| Credenti | 325-3175). | be approved and coordinated through the liaison for Lutheran Social Services, First Choice for Chil | | r | |
| 5221 H0046 | Professional Consultation Mental Health service, NOS | This service is authorized on a case by case bases upon the recommendation of a member of the Wraparound Management Team . A licensed Psychologist or Child Psychiatrist, considered to be an "expert" in their field, provides case consultation related to the treatment of a youth with complex diagnoses involving a developmental and/or a cognitive disorder. The practitioner (not currently providing services to the enrollee/family) provides a "one time" consultation designed to offer guidance, education and recommendations to care coordinators and/or a Child and Family Team in situations where they are experiencing extreme difficulty identifying an appropriate course of intervention for a designed youth and their family. | 100.00 | | Hour |
| Credenti | | cialty in Child Psychiatry or a Licensed Clinical Psychologist considered to be an "expert" in their fi mplex mental health, cognitive and developmental needs. | eld, with expertise | n the | |
| 5355 H0002 | Psych Hosp-ER Visit Behavioral health screening to determine adm | Triage assessment in a psychiatric hospital setting to assess need for inpatient hospitalization. ER visit rate paid only on clients NOT admitted to the ospital if a client is hospitalized, this fee is covered as part of the first day of hospitalization. | 255.00 | | Session |
| 5350 99223 | Psychiatric Hospital Hospital Care, per day | Placement in an inpatient psychiatric hospital for assessment and treatment of children with severe emotional and mental health problems. These are children who are determined to be dangerous to themselves or others due to a mental illness and require hospitalization as the least restrictive alternative. Hospitalization should be short-term with the goal of returning the child to a home or community placement as soon as possible. This service must be pre-authorized by the | 800.00 | | Daily |

| Service Name / ID |) | | Set IPN Rate | Avg IPN Rate | Billing Un |
|-------------------------------|---|---|-----------------|-----------------|------------|
| | | Mobile Urgent Treatment Team for Wraparound youth. | | | |
| Credentid | als: | | | | |
| 5050 90862 | Psychiatric Review/Meds Pharmacologic mgmt | Prescription monitoring and evaluation of medication on an outpatient basis by a licensed Psychiatrist. These sessions are usually brief reviews and medication monitoring (with no more than minimal psychotherapy, generally 15 to 30 minutes). | 80.00 | | Session |
| Credentid | als: M.D. License in the application | on process. | | | |
| | Effective 1/1/2007, providers | of this services must have a National Provider Identifier (NPI) | | | |
| 5051 90862 | Psychiatric Review/Meds-with Therapy Pharmacologic mgmt | Prescription monitoring on an outpatient basis by a licensed Psychiatrist, including medical evaluation and medication management services, with interactive, insight-oriented or supportive psychotherapy (generally 30 minutes or more). | 150.00 | | Session |
| 90805,9 0807,90 811,908 | Medical Evaluation and Medication Management | | | | |
| Credentic | als: M.D. License. | | | | |
| | Providers of this services mus | st have a National Provider Identifier (NPI) | | | |
| 5180B 96101 | Psychological Eval. Extended-Ph.D. Psychological testing | Used in conjunction with 5180A, Evaluation Services, Ph.D. If a psychological evaluation will be of a more extensive nature than is customary, the case manager and provider may request an enhanced rate be paid for the evaluation, but this service must be prior authorized by the Director of the Mobile Urgent Treatment Team (Wraparound Chief Psychologist). A psychological report on the specific findings must be submitted to the care coordinator within 30 days of the appointment. | 1.00 | | Dollar |
| Credentio | als: Wisconsin Psychologist Licer | nse. | | | |
| | | of this services must have a National Provider Identifier (NPI) | | | |
| 5180A 96101 | Psychological Evaluation Services-Ph.I Psychological testing | Performed by a licensed psychologist. Requires a written report, including a DSM-IV diagnosis addressing all five axis and specific treatment recommendations. A psychological report of specific findings must be submitted to the Care Coordinator within 30 days of the appointment. | 350.00 | | Evaluatio |
| 90801 | Psychiatric diagnostic interview exam | | | | |

| Service Name / ID |) | | | Set IPN Rate | Avg IPN Rate | Billing Unit |
|----------------------|--------------------------|---|--|--|--------------------------|--------------|
| Credentic | als: | Wisconsin Psychologist Lice | ense. | | | |
| | | Effective 1/1/2007, provider | s of this services must have a National Provider Identifier (NPI) | | | |
| 5526 H2022 | Recre: Comn servic | ation Programming-Full Day nunity-based wraparound e | These are programs that offer supervision and structure for youth. Programs must include planned social and recreational activities. This service is used when school is not in session, and can only be provided in an agency setting. A minimum of 6 hours and up to 9 hours per day of service may be provided. The agency rate must be identified at the time of application. NOTE: Transportation may NOT be use in conjunction with RECREATION PROGRAMS. Transportation to Recreation Programming is to be provided by the agency providing the recreation program or by the child's family. | | 60.00 | Daily |
| | Comn per di | nunity-based wrap services, em | | | | |
| Credentic | - | | Day Care License is required if serving four to eight children under the age of seven or eight or more chil | dren to age | 12. | |
| | | hours of training. Training m training in cardiopulmonary Training may be documented of the above areas is accepta | the at least 21 years of age and have at least 1 year of experience working with children and have completed as include: early childhood training, child/human growth and development, early childhood education, for resuscitation, recognition of and reporting of childhood abuse and neglect, orientation to agency policies divia: attendance sheets, certificates of attendance or diplomas and is to be keep on file by the agency. Proble with the appropriate supporting documentation. providing recreation programming must be: at least 18 years of age, have a valid driver's license and have | irst aid trair and proced ior training | ning, ures. in any | |
| | | of driving experience. Agen | cy employees must complete 24 hours of training as described above within 6 months of employment. Pr ble with the appropriate supporting documentation. | | | |
| | | Individual agency rates will provided in conjunction with | tified at the time of application. be approved based on components the program (i.e. number of hours per umber of meals/snacks provided; frequency portation, etc.). | | | |
| | | 1 1 | be included in the application process. | | | |
| 5527 H2022 | Recres Comm servic | ation Programming-Half Day nunity-based wraparound e | These are programs that offer supervision and structure for youth. Programs must include planned social-recreational activities. This service is used when school is not in session, and can only be provided in an agency setting. A minimum of 4 hours and up to 6 hours per day of service may be provided. NOTE: Transportation may NOT be use in conjunction with RECREATION PROGRAMS. Transportation to | | 35.00 | Daily |

| per diem Credentials: A Day The p hours trainin Traini of the Provid of driv of the The a with t transp A pro 5340 Residential Ca Behavioral hea residential | r program supervisor must rs of training. Training maning in cardiopulmonary raining may be documented the above areas is acceptably acceptably to the above areas is acceptably to the above areas is acceptably agency rate is to be identified to the above areas is acceptably agency rate is to be identified to the acceptable agency rate is to be identified to the acceptable agency rate is to be identified to the acceptable agency rate is to be identified to the acceptable agency rate is to be identified to the acceptable acc | Recreation Programming is to be provided by the agency providing the recreation program or by the child's family. Day Care License is required if serving four to eight children under the age of seven or eight or more to be at least 21 years of age and have at least 1 year of experience working with children and have co any include: early childhood training, child/human growth and development, early childhood education resuscitation, recognition of and reporting of childhood abuse and neglect, orientation to agency policy in attendance sheets, certificates of attendance or diplomas and is to be keep on file by the agency policy with the appropriate supporting documentation. Providing recreation programming must be: at least 18 years of age, have a valid driver's license and can be expected by the agency of the expected above within 6 months of employments of employees must complete 24 hours of training as described above within 6 months of employments with the appropriate supporting documentation. Individual agency rates will be approved based on components prover of hours per day the program operates; number of meals/snacks provided; frequency of outings; incomplete the children and have considered above within 6 months of employments and the program operates; number of meals/snacks provided; frequency of outings; incomplete the children and have considered above within 6 months of employments. | mpleted at least on, first aid train cies and proced. Prior training have at least on t. Prior training | t 24 ning, ures. in any ne year in any | |
|---|--|--|--|---|-------|
| per diem Credentials: A Day The p hours trainin Traini of the Provid of driv of the The a with t transp A pro 5340 Residential Ca Behavioral hea residential | Pay Care Certification or Interpretation or Interpretation or Interpretation of Inte | t be at least 21 years of age and have at least 1 year of experience working with children and have co ay include: early childhood training, child/human growth and development, early childhood education resuscitation, recognition of and reporting of childhood abuse and neglect, orientation to agency policities attendance sheets, certificates of attendance or diplomas and is to be keep on file by the agency pole with the appropriate supporting documentation. Providing recreation programming must be: at least 18 years of age, have a valid driver's license and be expended by employees must complete 24 hours of training as described above within 6 months of employment pole with the appropriate supporting documentation. | mpleted at least on, first aid train cies and proced. Prior training have at least on t. Prior training | t 24 ning, ures. in any ne year in any | |
| The p hours training Training of the Provide of drive of the The against training of the The against training the transposition A procession Residential Ca Behavioral head residential | r program supervisor must rs of training. Training maning in cardiopulmonary raining may be documented the above areas is acceptably acceptably to the above areas is acceptably to the above areas is acceptably agency rate is to be identified to the above areas is acceptably agency rate is to be identified to the acceptable agency rate is to be identified to the acceptable agency rate is to be identified to the acceptable agency rate is to be identified to the acceptable agency rate is to be identified to the acceptable acc | t be at least 21 years of age and have at least 1 year of experience working with children and have co ay include: early childhood training, child/human growth and development, early childhood education resuscitation, recognition of and reporting of childhood abuse and neglect, orientation to agency policities attendance sheets, certificates of attendance or diplomas and is to be keep on file by the agency pole with the appropriate supporting documentation. Providing recreation programming must be: at least 18 years of age, have a valid driver's license and be expended by employees must complete 24 hours of training as described above within 6 months of employment pole with the appropriate supporting documentation. | mpleted at least on, first aid train cies and proced. Prior training have at least on t. Prior training | t 24 ning, ures. in any ne year in any | |
| hours trainin Traini of the Provid of driv of the The a with t transp A pro 5340 Residential Ca Behavioral hea residential | rs of training. Training maning in cardiopulmonary raining may be documented the above areas is acceptably acceptably and the above areas is acceptably acceptable above areas is acceptable agency rate is to be identified. | ay include: early childhood training, child/human growth and development, early childhood education resuscitation, recognition of and reporting of childhood abuse and neglect, orientation to agency policities attendance sheets, certificates of attendance or diplomas and is to be keep on file by the agency pole with the appropriate supporting documentation. providing recreation programming must be: at least 18 years of age, have a valid driver's license and be employees must complete 24 hours of training as described above within 6 months of employment pole with the appropriate supporting documentation. It filed at the time of application. Individual agency rates will be approved based on components providing agency rates. | on, first aid train cies and procedon. Prior training have at least on t. Prior training | ning, ures. in any ne year in any | |
| The a with t transp A pro 5340 Residential Ca Behavioral hea residential | agency rate is to be ident | tified at the time of application. Individual agency rates will be approved based on components prov | • | ction | |
| 2048 Behavioral hearesidential | sportation, etc.). | be included in the application process. | | | |
| residential | Care Center for Children & | Placement in a licensed Residential Care Center for children with severe emotional, | | 261.83 | Daily |
| | icattii, iong term | behavioral or mental health problems. Placements may be made for 30 days or less | | | |
| 'redentials: Resid | | with a goal of crisis stabilization and/or evaluation/ assessment before returning home | | | |
| 'redentials: Resid | | or to a foster parent. Placements may be made for longer periods over 30 days when | | | |
| redentials: Resid | | a child needs more intensive supervision or treatment. As of 1/1/99, all residential | | | |
| redentials: Resid | | care placements must be pre-authorized by Wraparound; pre-authorization periods | | | |
| redentials: Resid | | vary, but may be no longer than 90 days. All residential care placements must be | | | |
| redentials: Resid | | reviewed at least every 90 days. (Refer to Wraparound Policy #004.) | | | |
| | idential Care License | | | | |
| Residential Ca | Care-Specialized | | | 288.31 | Daily |
| 2048 Behavioral hea residential | nealth, long term | Short-term (up to 90 days), highly specialized and intensive program (i.e. developmentally disabled child with severe behavior challenges requiring one-on-one | | | |
| residential | | intervention; a SED child with severe, high risk or harmful behaviors requiring close | | | |
| | | , , , | | | |
| | | staff supervision and monitoring). This service must be prior authorized (Refer to | | | |
| Credentials: Resid | | staff supervision and monitoring). This service must be prior authorized. (Refer to Wraparound Policy #004.) | | | |

| Service Name / ID | | | Set IPN Rate | Avg IPN Rate | Billing Unit |
|----------------------|---|---|-----------------|-----------------|--------------|
| T2048 B | Residential Care-Type II Behavioral health, long term residential | A residential treatment facility certified to accept delinquent youth per Wisconsin State Statute 938.34 (4d). This service needs to be prior-authorized. (Refer to Wraparound Policy #004.) | | 180.00 | Daily |
| Credentials: | Residential Care License. | | | | |
| | Residential Rate Adjustment Residential care, NOS | This service code will be utilized when paying residential facilities their 8% rate adjustment based on crisis billing submitted. | | | Dollar |
| Credentials: | | | | | |
| | Residential Rate Adjustment, Prior Yea Residential care, NOS | This service code will be utilized when paying residential facilities their 8% rate adjustment based on crisis billing submitted. This service code will be used anytime a payment needs to be posted to a prior calendar year AFTER MARCH 31ST of the current year (i.e., if a 2006 payment needs to be posted after 3/31/07). The service recipient field will be used to enter the client's name (if appropriate), and the provider field will be used to code in the specific service code. | | | Dollar |
| Credentials: | | | | | |
| T2033 R | Residential Short-Term Stabilization Residential care, NOS | A specialized short-term residential care center or like facility designed to assess, stabilize and link a child to formal and informal resources to facilitate a child's placement in or return to a community placement. Length of stay may range from 15 to 60 days. (Stays less than 15 days would be considered Respite Residential (service code 5412.) These resources work in partnership with the child and family teams to identify needed community services and work with the child's family, foster parent or other caretakers to alleviate the conditions preventing the child's successful placement in the community. These facilities usually provide clinically supervised treatment services, transportation, recreation, but may not provide all the services of a regular residential care center. This service must be prior authorized. (Refer to Wraparound Policy #004.) | 175.00 | | Daily |
| Credentials: | Residential Care License | | | | |
| H0045 R | Respite, Daily Respite care not in the home, per lay | The daily rate applies to children in respite during the day, with a minimum of four hours. Daily respite must not be used for overnight service. This service is limited to Children's Service Society. | 50.00 | | Daily |

| Service Name / IE |) | Set IP Rate | | Billing Uni |
|----------------------|---|--|-----------|-------------|
| 5413 S5151 | Respite, Daily Unskilled respite care, non-hospice | The daily rate applies to children in respite during the day, with a minimum of four hours. Daily respite must not be used for overnight service. This service is limited to Children's Service Society. | 50.00 | Daily |
| Credentio | als: Child Placing Agency Lices | nce and Foster Care License for the direct service provider. | | |
| 5411 H0045 | Respite, Foster care Respite care not in the home, per day | Overnight or short-term care (14-30 days) in a licensed foster home. The Foster Home or Treatment Foster Home licensing agency must approve this placement. Respite may not be used as a placement option if the child has no placement. Respite should be regularly scheduled as determined by the Child and Family Team and reflected in the Plan of Care or Treatment Plan. Respite for an emergency should be documented in the Crisis Plan in the Plan of Care or Treatment Plan. | | Daily |
| | | Care Coordinators or Case Managers placing children must make sure there is an up-to-date Foster Care License, have written consent by the parent/legal guardian, and change of placement. Care Coordinators and Case Managers must monitor this placement and coordinate child's return to their home. | | |
| Credentio | als: Foster Care License or Chil | d Placing Agency License | | |
| 5410 T1005 | Respite, Hourly Respite care sves, up to 15 min | Temporary care, not to exceed eight hours per day, required to relieve the principal caregiver of the stress in taking care of child or for other reasons that help sustain the family structure or meet the needs of the child. Hourly respite should be a regularly scheduled need as determined by the Child and Family Team and reflected in the Plan of Care or Treatment Plan. Hourly respite for an emergency should also be documented in the crisis plan in the Plan of Care or Treatment Plan. Hourly respite may be provided in the child's home, respite provider's home, or in an agency setting by a qualified provider. The parent/legal guardian must provide signed consent for hourly respite. | | Hour |
| S5150 | Unskilled respite care, non-hospice | | | |
| Credentio | als: A Family Day Care License | e is required if serving four or more youth for less than 24 hours per day. A Group Day Care License is required it than 24 hours per day (DH&FS, Chapter HFS 45 and HFS 46). | f serving | |
| 5412 H0045 | Respite, Residential Respite care services, not in the home | Overnight respite care in a licensed residential care center for children and youth shall not exceed 9 days per episode. If there is a need for an extension, care managers must contact their Wraparound Liaison. | 105.00 | Daily |
| | Respite care not in the home, per day | | | |
| | | Page 40 of 75 | | |

| Service Name / ID |) | | Set IPN Rate | Avg IPN Rate | Billing Unit |
|----------------------|--|---|-----------------|-----------------|--------------|
| Credentio | als: Child Placing Agency Licer | nse or Residential Care License | | | |
| 5415 H0045 | Respite-Crisis-FOCUS Respite care not in the home, per day | Overnight respite care in a licensed residential care center for children and youth shall not exceed 9 days per episode. If there is a need for an extension, care managers must contact their Wraparound Liaison. Service includes youth in a crisis. Only for the FOCUS Program. | 205 | | Daily |
| Credentio | als: Child Placing Agency Licer | nse or Residential Care License | | | |
| 5502A T2022 | Safety Services Mgmt-Daily Rate Case management | STATE CONTRACTED SERVICE ONLY: Responsible for providing, coordinating and managing the provision of service and for insuring the completion of program requirement for each assigned family. Duties include: a. Meet with family to identify needs and assign the necessary safety service providers. (The initial Assessment Worker creates the preliminary treatment plan and services.) b. Finalize the safety plan with the initial assessment worker. c. Direct the implementation of the necessary services as required and insure services are provided at the level and frequency identified in the safety plan. d. Maintain weekly face-to-face contact with the family and direct the completion of weekly child safety re-assessments with safety service providers. e. Make modifications to the safety plan as necessary and implement changes as needed in services. f. Identify and analyze the causes of safety concerns and assist the family in developing linkages to services and resources. g. Contact the initial assessment worker if at any time the child is not deemed safe to determine the need and procedure for temporary removal of the child. | 21 | 21 | Daily |
| Credentio | other human service field or | nust possess a Bachelor of Arts or Bachelor of Science degree in social work, psychology, nursing, or Bachelor of Arts or Bachelor of Science degree in a related field with at least one year's experiencustice. Experience in Case Management is also desirable. | | | |
| 5270 T2003 | School Accountability Program Non emerg transport, per trip | The sole provider of School Accountability is Integrity Family Service. This service provides supervised transportation for youth being transported daily to Norris School following release from the Norris Residential Program. The Wraparound Milwaukee Program Director must approve this service prior to the service being provided. Youth are transported to and from Norris School weekdays by a Crisis Intervention traing staff from Integrity Family Services for the duration of the Wraparound Administration authorization. Integrity is limited to one trip in the morning and one trip in the afternoon to transport youth to the Norris School program. Other trips are the responsibility of the youth's Child and Family Team. | 55.00 | 55.00 | Daily |

| Service Name / ID | Set IPN Rate | Avg IPN Rate | Billing Unit |
|---|-----------------|-----------------|--------------|
| Integrity staff will - Pick the youth up from their current residence (the care coordinator is respnsible for notifitying Integrity staff of the youth's current residence) Provide transportation and supervision for each youth during transport to Norris School (W247 S10395 Center Drive, Mukwonago, WI) -Return the youth each day to their current residence. | | | |
| Note: Transportation pick-up and drop-off address must be the same address each day. | | | |
| Agency to maintain daily log indicating to and from trips and client compliance. Credentials: Valid Wisconsin Driver's license. Copy of an acceptable driver's abstract on file with Integrity Human Resource Dept. Insurance coverage per Wraparound Milwaukee Fee-for-Service Agreement at the time the service is provided. Crisis Intervention training. | | | |
| Shelter Care (Boys) Respite care not in the home, per day State-licensed facility for the temporary care and placement of a Wraparound-enrolled boy (ages 12-18) under a CHIPS order. This is to be used for a youth who is in transition to a more permanent living situation, i.e. home, foster or group home, or residential care center. A Wraparound agency referral form must be completed and given to the shelter care facility for a child in placement. | 92.00 | | Daily |
| Credentials: Shelter License | | | |
| Shelter Care (Girls) Respite care not in the home, per day State-licensed facility for the temporary care and placement of a Wraparound-enrolled girl (ages 12-18) under a CHIPS order. This is to be used for a youth who is in transition to a more permanent living situation, i.e. home, foster or group home, or residential care center. A Wraparound agency referral form must be completed and given to the shelter care facility for a child in placement. | 84.00 | | Daily |
| Credentials: Shelter License | | | |
| Shelter Care (Younger Children) Respite care not in the home, per day State-licensed facility for the temporary care and placement of a Wraparound-enrolled younger child (ages 6-11) under a CHIPS order. This is to be used for a youth who is in transition to a more permanent living situation, i.e. home, foster or group home, or residential care center. A Wraparound agency referral form must be completed and given to the shelter care facility for a child in placement. | 84.00 | | Daily |
| Credentials: Shelter License | | | |

| Service Name / ID | | Set IPN Avg IPN Rate Rate | Billing Unit |
|----------------------|---|---|--------------|
| 5130 H2033 | Special Therapy Multi-systemic therapy for juveniles, per 15 min | Therapies, including art, dance, music, occupational therapy, including sensory integration therapy) or Equine Facilitated Experiential Learning (therapeutic horseback riding that promotes psycho-social healing and growth. | Quarter Hour |
| Credentia | therapy, must be certified, (NBCOT), attach copies of 2) Masters-level licensed of 3) BS/BA Degreed-individual social and/or work skills, etc. 4) Certified member of the Learning. 5) Licensed Occupational | erapist with 1,000 hours of work experience and who possesses the required credentials/licenses; for dance, art and music registered, or accredited; For OT, must be licensed in Wisconsin. If certified by the National Board for Certification in OT of providers' certifications in the application process. psychotherapist in one of above special therapies; or dual with a minimum of 2,000 hours working with youth/families in which the focus of therapy may include promotion of community integration and/or recreational skill development, i.e. Recreation Therapist, Vocational Rehabilitation Therapist, e North American Riding for the handicapped Association (NARHA) in connection with Equine Facilitated Experiential Therapy Assistant under supervision of a licensed Occupational Therapist ence and copies of certifications/registrations/accreditations/licenses must be provided, as applicable, in the application process regoing. | |
| | | s licensed by the State of Wisconsin and must have a National Provider Identifier (NPI). | |
| 5131 H2033 | Special Therapy-Group Multi-systemic therapy for juveniles, per 15 min | Therapies, including art, dance, music occupational therapy (including sensory integration therapy) or Equine Facilitated Experiential Learning (therapeutic horseback riding that promotes psycho-social healing and growth utilizing group process. | Quarter Hour |
| Credentia | therapy, must be certified, (NBCOT), attach copies of 2) Masters-level licensed of 3) BS/BA Degreed-individual social and/or work skills, etc. 4) Certified member of the Learning. 5) Licensed Occupational of Documentation of experies in accordance with the form | erapist with 1,000 hours of work experience and who possesses the required credentials/licenses; for dance, art and music registered, or accredited; For OT, must be licensed in Wisconsin. If certified by the National Board for Certification in OT of providers' certifications in the application process. psychotherapist in one of above special therapies; or dual with a minimum of 2,000 hours working with youth/families in which the focus of therapy may include promotion of community integration and/or recreational skill development, i.e. Recreation Therapist, Vocational Rehabilitation Therapist, e North American Riding for the handicapped Association (NARHA) in connection with Equine Facilitated Experiential Therapy Assistant under supervision of a licensed Occupational Therapist ence and copies of certifications/registrations/accreditations/licenses must be provided, as applicable, in the application process regoing. | |
| 5568 H2014 | Specialized Academic Support Services Community-based wrap services | • | Hour |

of Care in relation to an educational need which can be reasonably achieved with focused, short term assistance. Specialized Academic Support is a time limited service not to exceed 90 days or 50 total hours of service, with an emphasis on the achievement of immediate outcomes which are linked to overall academic needs. Youth with an Individualized Education Plan shall receive individualized academic support services that support the needs identified on the IEP. For youth without an IEP, Provider shall document the need for this service by identifying individual strengths, limitations, and special academic needs via individual testing and/or a formal diagnosis such as a Learning Disorder, Cognitive Disorder, Emotional Disorder or other DSM IV Diagnosis that adversely impacts in the youth's academic performance. An individualized support plan shall be developed and reviewed with the youth and family/Care Coordinator to identify the proposed measurable objectives for the service recipient to achieve short term academic goals. This plan shall identify specific learning objectives, their timeline for completion, and how they will be measured. Services shall focus on the basic areas of reading, writing, math, and study skills. Service intensity (hours per day, days per week) and duration will reflect individual needs. Pre/Post testing of youth shall be conducted initially and upon discharge or following 50 hours of service in order to document gains in a discharge report to be submitted to the family and Care Coordinator. Reports regarding the service recipient's accomplishments and continuing challenges shall be provided through monthly face-to-face meetings with the parent/caregiver and in the form of a brief written monthly report that is to be submitted to the parent/caregiver and Care Coordinator. The report shall include the following minimum content:

- 1) Specific short term goals, expressed in terms of increases/decreases, by what amount, and how they are being measured. (e.g., perform 3rd grade level addition and subtraction with 75% accuracy, increasing from baseline of 50%, using [indicate measurement tool(s) if a standardized instrument, or attach if enrollee-specific].
- 2) For each goal, a description of the strategies being used to meet the goal.
- 3) For each goal, a description of the progress being made, to include revisions to the goal, if applicable. If goals are revised, a discussion of the rationale shall be included.

Outcome goals must be related to the youth's immediate, short term academic needs and/or the youth's ability to manage academic requirements associated with a classroom setting such as taking tests, completing homework, etc.

As part of the application process, agencies shall submit assessment, plan, and monthly and discharge report templates as well as testing instruments and/ or testing rationale/methodology for review and approval.

| Service Name / ID | <u> </u> | | Set IPN Rate | Avg IPN Rate | Billing Unit |
|----------------------|--|---|-----------------|-----------------|--------------|
| 5568 H2021 | Specialized Academic Support Service Community-based wrap services, per 15 min | This is an agency based, one-to-one service which must be identified in youth's Plan of Care in relation to an educational need which can be reasonably achieved with focused, short term assistance. Specialized Academic Support is a time limited service not to exceed 90 days or 50 total hours of service, with an emphasis on the achievement of immediate outcomes which are linked to overall academic needs. Youth with an Individualized Education Plan shall receive individualized academic support services that support the needs identified on the IEP. For youth without an IEP, Provider shall document the need for this service by identifying individual strengths, limitations, and special academic needs via individual testing and/or a formal diagnosis such as a Learning Disorder, Cognitive Disorder, Emotional Disorder or other DSM IV Diagnosis that adversely impacts in the youth's academic performance. An individualized support plan shall be developed and reviewed with the youth and family/Care Coordinator to identify the proposed measurable objectives for the service recipient to achieve short term academic goals. This plan shall identify specific learning objectives, their timeline for completion, and how they will be measured. Services shall focus on the basic areas of reading, writing, math, and study skills. Service intensity (hours per day, days per week) and duration will reflect individual needs. Pre/Post testing of youth shall be conducted initially and upon discharge or following 50 hours of service in order to document gains in a discharge report to be submitted to the family and Care Coordinator. Reports regarding the service recipient's accomplishments and continuing challenges shall be provided through monthly face-to-face meetings with the parent/caregiver and in the form of a brief written monthly report that is to be submitted to the parent/caregiver and Care Coordinator. The report shall include the following minimum content: | 55.00 | | Hour |
| | | Specific short term goals, expressed in terms of increases/decreases, by what amount, and how they are being measured. (e.g., perform 3rd grade level addition and subtraction with 75% accuracy, increasing from baseline of 50%, using [indicate measurement tool(s) if a standardized instrument, or attach if enrollee-specific]. For each goal, a description of the strategies being used to meet the goal. For each goal, a description of the progress being made, to include revisions to the goal, if applicable. If goals are revised, a discussion of the rationale shall be included. | | | |
| | | Outcome goals must be related to the youth's immediate, short term academic needs and/or the youth's ability to manage academic requirements associated with a classroom setting such as taking tests, completing homework, etc. | | | |
| | | As part of the application process, agencies shall submit assessment, plan, and monthly and discharge report templates as well as testing instruments and/ or testing | | | |

| Service Name / ID | | | Set IPN Rate | Avg IPN Rate | Billing Unit |
|----------------------|--|--|--|-------------------|--------------|
| | | rationale/methodology for review and approval. | | | |
| Credentials: | appropriate academic area the Special Education Teach | rvice must employ teachers with current certification by the Department of Public Instruction of the Agencies with an onsite school may utilize Bachelor Degree staff under the oversight of a Special cher providing the oversight must hold current DPI Certification. Current/valid teacher certification work before services can be provided and must be kept on file at the agency. Agency must employ led services. | l Education Teacher ns must be submitted | , but d to the | |
| | Supervision of providers n individual with a Master's | This service involves monitoring compliance with conditions of a court order including: school attendance, curfew or other court ordered conditions such as attendance at support groups or therapy sessions in order to maintain the client safely in the community. The frequency of this service varies, but may require seven day per week/daily monitoring. Contact may include morning wake-up visits, escorts to school or other court order identified appointments. Monitoring is by phone and face-to-face. Supervision/observation is designed to be short-term i.e.: 30 to 90 days. G.E.D.; Bachelor's Degree in a Human Services field is desireable. The provided by an individual with a Bachelor's Degree in a Human Service field and 2 years of Degree, in a Human Services field (submit copy of supervisor credentials with application). | • | or an | Daily |
| 5564A Suppo | NOTE: Do NOT need to some orted Indep Living-Phase I orted housing, per diem | Supported Independent Living - Phase I services may be used (though they are not required) as a preliminary placement for adolescents ages 17 to 18 as deemed appropriate by the Child and Family Team process for youth receiving Supported Independent Living. "Phase I" is a 30 to 90 day temporary placement in a facility managed by or leased by the agency providing the service. Supported Independent Living - "Phase I" allows assessment and preliminary preparation of youth where there may be concern about the youth's preparedness to move directly to a community-based independent living under service code 5564. This service requires daily contact with the youth. Full financial subsidies are provided for the youth in the areas of security deposits, utilities, transportation, food and laundry, and other spending money as appropriate. Skill development focuses on "hands on" opportunities in the areas of employment readiness, money management and budgeting, cooking, nutrition, health, meal preparation, shopping for groceries | Varies | | Daily |

Appropriate change of placement protocols established by Wraparound Milwaukee, Children's Court and/or the Bureau of Milwaukee Child Welfare including obtaining a court order prior to placement must be followed by the Care Coordinator, provider agency and youth.

Credentials:

A Group Home License under Wisconsin State Statutes 48.60-48.77 must be submitted in the application process, along with documentation from the State Bureau of Fiscal Services establishing the daily rate.

Independent Living Program Coordinator must possess a minimum of a Bachelor's Degree with 2,000 plus hours of experience with children and families in a community setting and residential living program, i.e., group homes, foster care and residential treatment.

Staff are expected to have prior training and experience in providing independent living skills to this target population.

A description of the program and credentials of the coordinator must be provided in the application process.

5564C H0043

Supported Indep Living-Youth and Par-Supported housing, per diem

Supported Independent Living - Youth and Parent is designed to maintain family unity while offering training and supervision for the youth and their parent in the area of independent living skills. The parent must be capable of managing an independent setting with minimal support services. This service is the same as Supported Independent Living (Service Code 5564), with modifications as outlined below.

Provider agency staff assists with locating and securing affordable, well-maintained, community-based housing to include:

- -Negotiation and mediation with landlords related to rental agreements.
- -Payment of security deposit and rent while the family receives this service. The provider will pay full payment for the first three to six months, with the parent being required to contribute one-half of the cost of the rent one month after securing employment.
- -Some set-up assistance through a \$200 start stipend to help purchase household items, table, beds, dressers, lamp, other furnishings. Additional assistance to be secured through other resources or funding sources available to the family.

Financial assistance with the following while receiving this service:

- Rent payment \$650/month for a two bedroom apartment
- Utility payments \$200/month on budget plan
- Telephone \$50/month
- Food/Miscellaneous total expenditure of \$475 per month. Recommended allotment per category is: groceries/food \$300; miscellaneous (i.e.: household supplies, clothes and bus pass) \$175. Dollar amount spent for the combined categories of food/miscellaneous is flexible though food is the priority.

varies

122.00

This service also includes:

- -Approximately 10 hours per week of individualized life skills/home management training.
- -Curfew checks AM, PM, and weekend (combination of phone and face-to-face).
- -Assistance with locating job opportunities (if not provided through another service provider).

ROLE OF THE WRAPAROUND CARE COORDINATOR:

Liaison to the Supported Independent Living Program Coordinator. Develop an individualized Plan of Care addressing the independent living needs of the parent and youth. Coordinate and monitor the other needed services as identified in the Plan of Care i.e. educational and treatment services. Assist youth and parent with obtaining additional supports such as Food Stamps.

Monitor progress and transitional planning for adolescent prior to being disenrolled.

Coordinate services with Children's Court and/or Bureau of Milwaukee Child Welfare, other providers, and community supports.

Wraparound Milwaukee Administration to approve initial placement and 1st month SAR entry with Care Coordinator to authorize monthly service via Turnaround SAR thereafter.

Service may be authorized for maximum of one month prior to the family moving into their own living quarters. Authorization for parent assistance, household management, daily living skills or life skills training at the same time this service is being authorized requires Wraparound administrative approval.

Credentials:

Independent Living Program Coordinator must possess a minimum of a Bachelor's Degree with 2,000 plus hours of experience with children and families in a community setting and residential living program, i.e., group homes, foster care and residential treatment.

Agency providers must possess a minimum of a High School diploma or equivalent with at least 2 years (full-time) experience in working with children or adults in an education, childcare or health care setting providing direct client services/care. Agency providers with bachelor's degree or above and at least 1 year of experience working with the target population are not required to have additional oversight.

Staff is expected to have prior training and experience in providing independent living skills to the target population.

Supervision can be demonstrated in routinely conducted review meetings (documented at least monthly) or co-signing of documentation related to client participation in programming.

5564B Supported Indep Living-Youth w/Depe

116.00

female youth ages 17 to 18 with minor children who will be living with them in the their apartment. This service is the same as Supported Independently Living (Service Code 5564), with modifications associated as outlined below. Provider agency staff assist with locating and securing affordable, well-maintained, community-based housing to includes:

- -Negotiation and mediation with landlords related to rental agreements.
- -Payment of security deposit and rent while the youth receives this service. It is acceptable for the youth to have a roommate, however, minor child (or children) of youth must have a separate bedroom. The provider will pay full payment for the first three months, after which the adolescent will be asked to contribute one-half of the cost of the rent.
- -Some set-up accommodations including providing a bed and dresser for the Wraparound enrolled youth \$200 start up stipend.
- -Financial assistance with the following while receiving this service:
- -Utility payments up to \$200/month on budget plan
- -Food to \$200/month.
- -Telephone to \$50/month.
- -Diapers/baby supplies to \$100/month.
- -Clothes/misc. to \$75/month.
- -Transportation to \$64/month (bus passes).

This services also includes:

- -Approximately 8 hours per week of individualized life skills training.
- -Daily house checks (combination of phone and face-to-face).
- -School checks (daily if needed).
- -Up to 8 hours per month life skills group.
- -Monitoring and assistance with doctor appointment for youth and minor child/children.

Rate modification or repayment to Wraparound will be applied by Foster Youth Independence if the Bureau of Milwaukee Child Welfare assumes financial responsibility for services for the youth's minor child/children or if the parent/legal guardian of the adolescent contributes to expenses outlined above.

ROLE OF THE WRAPAROUND CARE COORDINATOR:

Liaison to the Supportive Independent Living Program Coordinator. Develop an individualized Plan of Care addressing the independent living needs of the adolescent Coordinate and monitor the other needed services as delineated in the Plan of Care i. e. educational and treatment services. Assist youth with obtaining additional supports such as Food Stamps and enrolling in WIC program.

- Payment of rent (and security deposit prior to moving) for duration of placement. It is expected that the provider will pay full payment for the first three months, after which the adolescent will be asked to contribute one-half of the cost of the rent

(whenever possible). (For Lad Lake only.) Assist with daily living skills, i.e., budgeting, household management, nutrition, safety skills in the community, vocational needs, personal hygiene, leisure activity, future housing, accessing community resources, etc.

- Supervision through visits to the apartment with 24-hour coverage capability in case of emergencies related to the living situation. Assist with employment search followed by monitoring of employment situation (for Lad Lake only).

CRITERIA FOR PROGRAM

- Age 17
- Able to demonstrate emotional and behavioral stability and a level of self-sufficiency, i.e. taking medication, attending school, employed or close to employment and job readiness, motivation to living independently and plan for future, able to manage money and or willing to accept payee if needed.
- Approved by the Court and parent or legal guardian with ongoing involvement with parent/legal guardian whenever possible.
- If adolescent girl referred has her own child(ren), the Bureau of Milwaukee Child Welfare must coordinate services for the baby or young child. Parent/legal guardian for adolescent and baby must contribute to expenses whenever possible.

ROLE OF OTHE WRAPAROUND CARE COORDINATOR:

Liaison to the Supportive Independent Living Program Coordinator. Develop an individualized Plan of Care addressing the independent living needs of the adolescent Coordinate and monitor the other needed services as delineated in the Plan of Care i. e. educational and treatment services.

Monitor progress and transitional planning for adolescent prior to being disenrolled.

Coordinate with Bureau Worker when the adolescent has a baby or young child in their care to access services such as day care, formula, and diapers.

Assist with accessing natural support services in the community.

QUALIFICATIONS AND ROLE OF THE SUPPORTED INDEPENDENT LIVING PROGRAM COORDINATOR:

Supervise staff providing day to day assistance.

Vocational and job coaching provided as identified in the Plan of Care.

| Service Name / ID | | | Set IPN Rate | Avg IPN Rate | Billing Unit |
|-------------------------------|--|---|-----------------------|-----------------|----------------|
| | | Communication and collaboration with Wraparound Care Coordinator, i.e. attend Plan of Care and Family Team Meetings. | | | |
| | | Monitor and document progress in independent living. | | | |
| | | Evaluate further independent living needs prior to disenrollment from Wraparound. | | | |
| Credentials: | | a Coordinator must possess a minimum of a Bachelor's Degree with 2,000 plus hours of experiencing and residential living program, i.e., group homes, foster care and residential treatment. | ce with children and | | |
| | Staff are expected to have pr | rior training and experience in providing independent living skills to this target population. | | | |
| | A description of the program | n and credentials of the coordinator must be provided in the application process. | | | |
| S5145 Fosi dien Credentials: | child Placing Agency Licen Dension Accountability Program | Suspension School Diversion is an intervention program designed for students | 50.00 | | Daily Daily |
| per | 15 min | suspended from school for various offenses. Services to be provided within the context of the day program shall include tutoring, daily living skills, supported work environment, life skills training, and informal counseling and support (in which the focus is not treatment). Transportation may also be provided. Students that are enrolled in this program are monitored closely and must work on academic subjects while in attendance. A day plan/curriculum must be presented in the application process along with hours of operation. This service may not provide day treatment. | | | |
| H0022 Con Serv | nmunity Based Wraparound vice | | | | |
| Credentials: | Teachers/facilitators of servi serving more than three thro | ces must provide documentation setting forth prior tutoring and/or teaching experience. A Day C ugh the age of 12. | Care License is requi | red if | |
| 5510 Targ T1017 Targ | geted Case Mgmt / SAIL Service geted case mgmt, per 15 min | Targeted Case Management Services are accessed through the Adult Community Services/SAIL Programs to assist youth and young adults (17 ½ and over) to transition into the adult behavioral health service system. Targeted Case Management services are an adjunct service to care coordination designed to provide expert | 12.00 | | Quarter Hour |

| Service Name / ID | | Set IPN Rate | Avg IPN Rate | Billing Unit |
|---|--|-------------------|-----------------|--------------|
| | assessment and resource support to those youth over 17 ½ years of age with serious emotional and mental health needs (commonly referred to as Tier 3 youth). The Targeted Case Manager will assist the care coordinator and Child & Family Team to better understand and plan for the needs of these youth who are likely to need long-term support from the Adult Community Services Program. The Targeted Case Manager can specifically assist the care coordinator to help the young person obtain their social security card, apply for and/or retain their SSI, apply for Food Share and secure housing. The Targeted Case Manager will participate in the Child & Family Team meetings and will work with all Wraparound Programs as needed, including regular Wraparound, REACH, FOCUS, Project O'YEAH and the re-entry project. | | | |
| | Targeted Case Management services are only being purchased through Alternatives In Psychological Consultation at this current time. | | | |
| | The Targeted Case Manager will provide direct face-to-face contact only with enrolled youth and their families referred to them and approved by the SAIL program. The Targeted Case Manager will also provide phone consultation, collateral contact and other help needed to ensure the youth person makes the best possible transition into the Adult Community Services System. | | | |
| | nust possess a BA/BS degree in Social Work, Psychology, Nursing, Occupational Therapy or a natheadult behavioral health system experience preferred. | related human ser | vice | |
| Taxi - American United Taxicab No Sh Non emerg transport, per trip | Payment American United Taxicab Services for clinet "No Show" - ride is dispatched but client is not there and taxi does not return for paid fair for the same ride that day. | 5.00 | 5.00 | Trip |
| Credentials: Per established City of Milwa | ukee ordinance/requirements at the time that service is provided. | | | |
| 5576 Taxi - American United Taxicab Servic | Transportation services provided by American United Taxicab Service for destinations within 10 miles of the Milwaukee County limits. Trips (rides) are arranged in advance by the Wraparound Milwaukee Care Coordinator or FISS Case Manager using the Wraparound Milwaukee Transportation Referral Form. Authorized rides (per the referral form and plan of care) may include: therapy appointments, doctor appointments, job interviews and other non-therapeutic appointments. Trips (rides) may be for one-way or round trip, single episode or repeat rides to the same destination. Once the ride has been set-up by the Care Coordinator or FISS Case Manager, the Service Recipient must accept the ride to the prescribed destination. American United Taxicab will NOT accept a request from the Service Recipient to change the identified destination. | Varies | | Dollar |
| | For "Round Trip" rides, the Service Recipient or another responsible party at the point of origin for the return ride must contact American United Taxicab by phone to | | | |

Taxicab driver will decline the request to wait. If the Wraparound Milwaukee Service Recipient leaves the taxicab – the driver will depart and end the ride.

Only Wraparound Milwaukee Care Coordinators, FISS Case Managers and authorized Wraparound Finance staff may authorize a trip (ride) with American United Taxicab Service.

T2003 Non emerg transport, per trip

Credentials: Per established City of Milwaukee ordinance/requirements at the time that service is provided.

5506 Transitional Specialist-Care Coordinati T1017 Targeted case mgmt, per 15 min

Working within the Wraparound Milwaukee Program and Project O'YEAH, Healthy Transition's federal grant, a transitional specialist provides care coordination type services for youth and young adults, 16½ to 24 who have a serious emotional or mental health need and need mental health services and other support as they make the transition to adult hood. Types of services these youth and young adults need and may be provided or arranged by a transitional specialist includes: assessment, case management, community advocacy, access to mental health care, housing, employment, education or GED, independent living skills and other services and supports.

A Transitional specialist may provide consultation services to youth and the Child and Family Team while those youth, age 16½ or older are served by the regular

25.00

| Service Name / ID | | | Set IPN Rate | Avg IPN Rate | Billing Unit |
|------------------------|--|--|----------------------|-----------------|--------------|
| | | Wraparound or REACH program. They may also link youth and young adults to the Project O'YEAH Club House program to receive support, participate in group and skill building activities and recreation. The transitional specialist also may link youth with severe mental health needs to the Adult Services or SAIL program. | | | |
| | | Transitional Specialists help the young adult to develop a "Futures Oriented" care plan using the Wraparound Transition to adult hood and "TIP" curriculums. Transitional Specialists also document all care planning activities required by Wraparound Milwaukee and Federal Grant on the required information system including Synthesis and National Outcome Measurement Scale (NOMS). | | | |
| | | Currently providers are limited to agencies designated to provide services to homeless youth (Pathfinders), youth transitioning out of foster care (Lad Lake) and St. Charles Youth and Family Services. | | | |
| Credentials: | | ist possess a BA/BS degree in Social Work, Sociology, Psychology, Nursing, Occupational Therapylices work, preferably in case management. | y or a related field | with | |
| 5577 Trar T2003 Non | nsportation emerg transport, per trip | Transportation of Wraparound/FISS enrolled clients and families based on a referral for services for the Care Coordinator or Case Manager. | 15.00 | | Trip |
| | | Authorized trips (rides) (per the referral form and plan of care) may include: therapy appointments, doctor appointments, job interviews and other non-therapeutic appointments. Trips (rides) may be for one-way or round trip, single episode or repeat rides to the same destination. Once the ride has been set-up by the Care Coordinator or FISS Case Manager, the Service Recipient must accept the ride to the prescribed destination. | | | |
| | | Agencies providing transportation services must have an "emergency plan" policy that details the action/s the agency will follow in the event of an accident or if a youth/service recipient becomes ill while receiving services. | | | |
| | | Transportation providers must obtain clients/responsible adult signatures for all rides. | | | |
| Non | n-emergency transportation | | | | |
| Credentials: | Valid State of Wisconsin I Criteria: | Oriver's License | | | |
| | • | st have a valid Wisconsin driver's license. ver's License (Class C Minimum) is required for drivers of vehicles used to transport 15 or more pa | accangare | | |

- 2. A valid Commercial Driver's License (Class C Minimum) is required for drivers of vehicles used to transport 15 or more passengers.
- 3. An endorsement "S" on the driver's license is required for school bus drivers.

| Service Name / ID | | | Set IPN Rate | Avg IPN Rate | Billing Unit |
|----------------------|--|---|-----------------------|-----------------|--------------|
| | A copy of a Vehicle Inspec vehicle inspection. | f Transportation public driver record abstract that demonstrates a driving record free of serious to tion Report for each vehicle used to transport clients. All vehicles must have a sticker with the concaregiver Background Check and Insurance requirements as specified in the Wraparound Milways the service is provided. | current year verifyin | - | |
| 5578 T2003 | Transportation Mileage Non emerg transport, per trip | Transportation Mileage is used by WRAPAROUND MILWAUKEE FINANCE STAFF to reimburse Transportation Providers for mileage associated with Transportation Services authorized under Code 5577 – Transportation where total mileage for the ride is 6.0 miles or more. Transportation Mileage payments are limited to rides within 20 miles of the Milwaukee County line. Rides to destinations that are more than 20 miles outside the Milwaukee County limits must be prior authorized by the Wraparound Milwaukee Finance Director. Care Coordinators are responsible for obtaining this authorization prior to submitting a referral for services. Transportation Mileage is reimbursed in tenths of a mile at the rate in effect at the time the service was provided. | 1.75 | | Miles |
| Credentia | Non-emergency transportation Agency is authorized to provi | de Service Code 5577- Transportation and meets all requirements associated with Service Code | : 5577 – Transportat | ion. | |
| 5579 T2003 | Transportation-Additional Passenger Non emerg transport, per trip | Transportation Additional Passenger (Code 5579) is used by WRAPAROUND MILWAUKEE FINANCE STAFF to reimburse Transportation Providers where one or more additional passengers accompany the identified service recipient. Transportation Additional Passenger payments are made based on the Care Coordinator/Case Manager's referral for Transportation (Code 5577) that identifies a total of 2 or more passengers and verification of the multiple passenger ride per the transportation log. NO ADDITIONAL mileage payments will be made for additional passengers. | 10.00 | | Each |
| | Non-emergency transportation | | | | |
| Credentia | ds: Agency is authorized to provi | de Service Code 5577- Transportation and meets all requirements associated with Service Code | : 5577 – Transportat | ion. | |
| 5570 T2003 | Transportation-Non Network Provider Non-emergency transportation | For Wraparound & SafeNow: Transportation arranged by case managers and other non-transportation vendors in the Network for the purpose of transporting child and families to non-therapeutic sessions, parent support service activities, recreational activities, etc., as documented in the Plan of Care. Transportation may be provided by a family member or other person designated by the family. Transportation is arranged by the case manager in the pre-authorization process, and Wraparound | 1.00 | | Total |

| Service Name / ID | | | Set IPN Rate | Avg IPN Rate | Billing Unit |
|----------------------|---|---|-----------------|-----------------|--------------|
| | | Milwaukee/SafeNow reimburses the case management agency for the actual costs. | | | |
| Credentic | uls: | | | | |
| 5311B S5145 | Treat. Foster Care (Agency) Foster care, therapeutic, child, per diem | This service is for Wraparound Youth. Treatment Foster Care is provided by agencies which are licensed by the State to provide treatment foster care and meet Chapter 56 and Chapter 38 of the State Licensing Rules. As specified in Chapter 38.03 (27): | | | Daily |
| | | "Treatment Foster Care means a foster family-based and community-based approach to treatment for a child with physical, mental, medical, alcohol or other drug abuse, cognitive, intellectual, behavioral, developmental or similar problems which is designed to changed the behavior or ameliorate the condition which in whole or in part resulted in the child's separation from his or her family. The approach utilizes specially selected and specially trained treatment foster parents who, as members of a treatment team, have shared responsibility for implementing the child's treatment plan as the primary change agents in the treatment process." Among the responsibilities of the foster parent under HFS 38.06 that are of particular importance to Wraparound Milwaukee are: | | | |
| | | Assuming primary responsibility for implementing in-home care and treatment strategies specified in the treatment plan. Assisting and supporting a foster child in having appropriate and positive contact with his/her family. Providing or arranging transportation for the child as deemed necessary by the child and family treatment team. Cooperatively and consistently carrying out the Treatment Plan. Participating in the evaluation of his/her performance on a regularly scheduled basis. | | | |
| | | Responsibilities of the Provider treatment foster care agency and agency social service case manager in HFS 38.07 and HFS 38.10 of primary importance to Wraparound Milwaukee in purchasing this service are: -Arranging for a minimum of one unit of respite care per month. One unit shall consist of no less than 8 or no more than 24 consecutive hours. It will be determined by the Treatment Foster Care Agency if these units can be accumulated Providing or arranging for additional child care personnel during critical periods, such as after school or evenings Advocating for the child with the staff of the child's school (emphasis on public | | | |

school programs).

- Ensuring in the case of a child with a severe emotional disturbance that in addition to any other professionals on the child and family team, that a clinical consultant is also assigned to the family. The social worker, social services case manager or other professional involved in the care may serve as the clinical consultant if the individual meets the requirements under HFS 38.03(8).
- Contacting the foster parent at least twice monthly (one of the contacts must be face to face) for the purpose of assisting treatment foster parents in implementing treatment plans, assessing training needs of foster parents and providing skill training for specific problems encountered by the foster parents.
- Personally seeing and interacting with the child at least twice per month in a variety of settings, i.e. home, school, community.

Since Treatment Foster Homes are considered therapeutic settings and are required under HFS 38 to provide a range of services and supports, Wraparound Milwaukee will not as a rule authorize in-home therapy in the foster home for the foster parent and child, cover transportation costs for the child or fund after-school services for children in this setting. In-home therapy for the child and their biological parent(s) may be authorized for up to 90 days prior to reunification with the parent.

5311 103.70

Credentials:

Child Placing Agency License

The treatment foster parents and/or the supervising Master's level provider must be available to the youth at all times.

The treatment foster parents shall document daily contact notes relevant to their provision of mental health crisis services.

The treatment foster care agency shall maintain accurate and current documentation of all staff members' qualifications, including copies of degrees, training certificates, licenses, etc., and shall verify that all treatment foster parents meet the minimum requirements listed in HFS 34.21 (3)(b) 1-19. All other requirements relevant to hiring under caregiver law in Wisconsin apply. Supervision and training shall be provided as follows:

- 1. Medicaid requires that treatment foster parents with more than 6 months' experience providing care to a child with serious emotional and mental health disturbance have at least 20 hours of initial training and orientation within the first 3 months of foster parenting; those with less than 6 months require 40 hours of initial training within the first 3 months.
- 2. Foster parents must also receive at least 8 hours of additional training per year. Documentation of all training must be maintained on site at the treatment foster care vendor agency.
- 3. Treatment foster parents must receive one hour of weekly supervision by a Master's level provider. Agencies must maintain documentation of this supervision. The weekly supervision should include a review of how the treatment foster parents are implementing the child's crisis/safety plans and are effectively utilizing the plan.

5311A S5145

Treat. Foster Care (Agency) Youth w/D Foster care, therapeutic, child, per diem

This service is for Wraparound Youth with a dependent child or children that are placed with the youth in the treatment foster home.

128.98

Among the responsibilities of the foster parent under HFS 38.06 that are of particular importance to Wraparound Milwaukee are:

- 1) Assuming primary responsibility for implementing in-home care and treatment strategies specified in the treatment plan.
- 2) Assisting and supporting a foster child/youth in having appropriate and positive contact with his/her family.
- 3) Providing or arranging transportation for the youth and dependent child/children as deemed necessary by the Child and Family Treatment Team.
- 4) Cooperatively and consistently carrying out the Treatment Plan.
- 5) Participating in the evaluation of his/her performance on a regularly scheduled basis.

Responsibilities of the Provider/Treatment Foster Care Agency and agency social service case manager in HFS 38.07 and HFS 38.10 includes:

- -Arranging for a minimum of 8 to 24 hours of respite care to the foster parent.
- Providing or arranging for additional childcare personnel during critical periods, such as after school or evenings.
- Advocating for the youth and dependent children with the staff of the youth/children's school(s) (emphasis on public school programs).
- Ensuring in the case of a youth with a severe emotional disturbance that in addition to any other professionals on the Child and Family Team, that a clinical consultant is also assigned to the family.
- Contacting the foster parent at least twice monthly (one of the contacts must be face to face) for the purpose of assisting treatment foster parents in implementing treatment plans, assessing training needs of foster parents and providing skill training for specific problems encountered by the foster parents.
- Personally seeing and interacting with the youth at least twice per month in a variety of settings, i.e. home, school, community.

Since Treatment Foster Homes are considered therapeutic setting, Wraparound Milwaukee will not authorize in-home therapy in the foster home for the foster parent, cover transportation costs for the youth or fund after-school services for youth in this setting. In-home therapy for the youth and their biological parent(s) may be authorized for up to 90 days prior to reunification with the parent.

Credentials: State of Wisconsin Child Placing Agency License

Licensed by the State to provide treatment foster care, the agency and it providers must meet the requirements set forth in State of Wisconsin Chapter HFS 56 "Foster Home Care for Children" and Chapter HFS 38 "Treatment Foster Care for Children".

The agency is responsible for providing up-to-date licenses for foster parents with which Wraparound youth are placed.

The treatment foster care agency shall maintain accurate and current documentation of all staff members' qualifications, including copies of degrees, training certificates, licenses, etc., and shall verify that all treatment foster parents meet the minimum requirements listed in HFS 34.21 (3)(b) 1-19. All other requirements relevant to hiring under caregiver law in Wisconsin apply. Supervision and training shall be provided as follows:

- 1. Medicaid requires that treatment foster parents with more than 6 months' experience providing care to a child with serious emotional and mental health disturbance have at least 20 hours of initial training and orientation within the first 3 months of foster parenting; those with less than 6 months require 40 hours of initial training within the first 3 months.
- 2. Foster parents must also receive at least 8 hours of additional training per year. Documentation of all training must be maintained on site at the treatment foster care vendor agency.
- 3. Treatment foster parents must receive one hour of weekly supervision by a Master's level provider. Agencies must maintain documentation of this supervision. The weekly supervision should include a review of how the treatment foster parents are implementing the child's crisis/safety plans and are effectively utilizing the plan.

| Service Name / ID | | | Set IPN Rate | Avg IPN Rate | Billing Uni |
|----------------------|--|---|-----------------|-----------------|-------------|
| 5504 T1017 | Treat. Foster Care-Care Coordination Targeted case mgmt, per 15 min | The professional foster parent shall provide a transitional home devoted to the needs of one youth with the ultimate goal of helping and supporting that youth to achieve permanency with their family. | | 198 | Daily |
| | | Duties and Responsibilities: | | | |
| | | 1. Establish a caring, supportive, nurturing relationship with one adolescent young woman | | | |
| | | 2. Provide care coordination services, therapeutic intervention and support designed to help re-connect a young woman to her parent/s and strengthen bonds between the child and her parent/s. | | | |
| | | 3. Help prepare a young woman to be independent, feel confident and possess the skills necessary to live in her home and community. Activities include supporting her to attend school, provide tutoring to improve school performance and help with | | | |
| | | vocational preparedness. 4. Assume in partnership with parent/s the role of an advocate for the young woman including attending school, conferences, IEP meetings etc. Attends all court hearings | | | |
| | | with the young woman and her family and be accountable for youth following all court ordered conditions in accordance with her family members. | | | |
| | | 5. Maintain and encourage regular contact with the youth's parent/s and include the parent/s in recreational and other activities that keep them involved and connected with their child to support ultimate transition home. | | | |
| | | 6. Help develop with youth and parent/s, an individualized Plan of Care based on identified strengths, needs and resources of child, including a comprehensive 24-hour crisis/safety plan. | | | |
| | | 7. Help create with the youth and parent, a crisis safety plan that allows the child with safe places to run to and provide for a child to return to the foster home in a non-judgmental manner. | | | |
| | | 8. Facilitate team meetings to develop and update Plan of Care at least every 30 days. 9. Maintain regular contact with necessary individuals the youth may have involved in her life including Bureau Case Managers, Probation Workers, Judges, District | | | |
| | | Attorneys, etc. 10. Attend and provide transportation to all medical appointments in conjunction with young woman's parent/s. Assures follow through on all recommendations and/or | | | |
| | | needed medical attention. 11. Provide support, follow-ups, respite as needed to facilitate the transitional period to successful reunify the child with her parent/s. Includes a period of at least 90 days | | | |
| | | after re-unification to support youth's success in her family home. 12. Provide respite and support to other young women placed in similar homes, | | | |
| | | participate in support groups as desired with other professionals in the program | | | |

13. Seeks out assistance and support from other team members, foster care agency

6. Help develop with youth and parent/s, an individualized Plan of Care based on identified strengths, needs and resources, including a comprehensive 24-hour

places to run to and provide for the youth to return to the foster home in a

7. Help create with the youth and parent, a crisis safety plan that allows the youth safe

crisis/safety plan.

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| Service Name / ID | | | Rate | Avg IPN Rate | Billing Unit |
| | | 8. Facilitate team meetings to develop and update Plan of Care at least every 30 days. 9. Maintain regular contact with necessary individuals the youth may have involved in their life including Bureau Case Managers, Probation Workers, Judges, District Attorneys, etc. 10. Attend and provide transportation to all medical appointments in conjunction with youth's parent/s. Assures follow through on all recommendations and/or needed medical attention. 11. Provide support, follow-ups, respite as needed to facilitate the transitional period to successful reunify the youth with their parent/s. Includes a period of at least 90 days after re-unification to support youth's success in their family home. 12. Provide respite and support to other young women placed in similar homes, participate in support groups as desired with other professionals in the program 13. Seeks out assistance and support from other team members, foster care agency | | | |
| $C = 1 + c \cdot 1$ | D | and Wraparound Milwaukee as needed. | 1 (* 11 - 11 - 1 | ٠ | |
| Credentials: | | Social Work, Psychology, Nursing, Occupational Therapy or a BA or BS degree in an unrelated use management or equivalent area. | d field with experier | ice in | |
| | OR | | | | |
| | job with experience working 1. Able to be licensed by a tro 2. Will keep all licenses, cert 3. Will be evaluated on a bi-a 4. Be responsible for familian and HFS 56 rules. | ma or GED equivalent with at least two years experience as foster parent, youth worker, mentor with youth with serious emotional and mental health needs. Eatment foster care agency under HFS 38 and 56. If it is a simple of the serious extractions and insurance policies current and on file with the foster care agency. In the first year of licensing unless circumstances suggest the need for a special sizing themselves with the materials in the treatment foster care agency's manual and otherwise of the serious energy is a serious content of the serious extraction. | evaluation. | | |
| 5222A Treat H0032 MH s | ment Plan Meeting Attendance | | 96.00 | | Session |

7. Special Therapy (5130)

Credentials:

Requirements: Tutors are required to have knowledge of the subject matter and possess at least one year past experience in tutoring, teaching or other academic accomplishment. Tutors show evidence of experience/ training/ certification/ education specific to tutoring to be kept in their agency employee file and submitted to the Integrated Provider Network prior to providing services. Evidence of experience/training/ certification/ education can be submitted in the form of resume and two reference letters from a past/current employer or an actual teaching degree/degree in education or a letter from the agency director certifying the employee's prior experience as a tutor.

Agencies must submit their training curriculum outlining the 15 hours of training for approval by the Provider Network when applying for this service.

| Service Name / ID | | | Set IPN Rate | Avg IPN Rate | Billing Unit |
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| | | ng is required of all staff prior to service provision. A copy of the 15-hour training verification submitted to the Provider Network and a copy maintained in the agency employee file. | form verifying this | 3 | |
| 5520 H2021 | Tutoring - Group Community-based wrap services, per 15 min | Group Tutoring is provided to youth in groups of no more than 5 individuals by school based agency staff after school and on non-school days. Conducted by school staff in the school or day treatment setting, the groups are designed to provide guidance with the completion of assigned homework and help the youth improve their study habits. Youth referred for Group Tutoring services may be below grade level or experiencing difficulty with class work resulting in risk of receiving a failing grade in one or more academic classes. Whenever possible, the Care Coordinator should include school contact information for youth referred for this service so that agency staff can communicate directly with school staff regarding homework assignments. Youth will be asked to bring their home work to the group. The agency will maintain a daily record of the youth's work and accomplishments and will submit a monthly progress report to the care coordinator through Synthesis. The youth's Plan of Care should reflect the need for this service under the "Education Domain". Youth receiving this service may be comingled with youth receiving tutoring services through the agency's After School Program. | 12.00 | | Hour |
| | ommunity-based wraparound | | | | |
| Credentio | Oversight of the agency Tutor is to review youth's participat needed. Staff credentials to be | lowledge of the subject matter and possess at least one year past experience as a tutor, teaching a ring Program is to be provided by a Wisconsin Department of Public Instruction certified teacher ion and performance with the agency direct service providers on a weekly basis, providing staff a made available upon request. | r. The program sug guidance and direct | pervisor | |
| 5704 | Youth Relationship Building-A.S.A.P. | As part of the Alternatives to Sexual Assault Program (A.S.A.P.), an eight-week module is provided to introduce youth referred to the program to the building blocks of healthy relationships. The module is based on a curriculum developed by an organization called Think Marriage. The relationship-building module is a part of the A.S.A.P. treatment program and the youth are required to attend. A.S.A.P. Healthy Relationships sessions will include the following topics: - Sexually Transmitted Disease - Adolescent Development and Relationships - Developing Friendships First - Dating as an Adolescent - Learning About Unhealthy Relationships | 25 | | Session |

| Service Name / ID | | | Set IPN Rate | Avg IPN Rate | Billing Unit |
|----------------------|---|---|-----------------|-----------------|--------------|
| 5704 H0025 | Youth Relationship Building-A.S.A.P. Behavioral Health Prevention Education Service | As part of the Alternatives to Sexual Assault Program (A.S.A.P.), an eight-week module is provided to introduce youth referred to the program to the building blocks of healthy relationships. The module is based on a curriculum developed by an organization called Think Marriage. The relationship-building module is a part of the A.S.A.P. treatment program and the youth are required to attend. | 25 | | Session |
| | | A.S.A.P. Healthy Relationships sessions will include the following topics: - Sexually Transmitted Disease - Adolescent Development and Relationships - Developing Friendships First - Dating as an Adolescent - Learning About Unhealthy Relationships - How to Build a Healthy Relationship - Media, Pornography and Manipulation - Empowerment and Making Personal Positive Choices | | | |
| Credentia | Think Marriage staff. All proto limit number of vendors pro | ally completed Think Marriage training and maintain up-to-date participation in ongoing refresher train viders must have up-to-date background checks on file with the parent agency. Wraparound Milwaukoviding this service to those directly trained by Think marriage and with review and final approval of a k or other Wraparound Milwaukee designee. | ee reserves th | e right | |